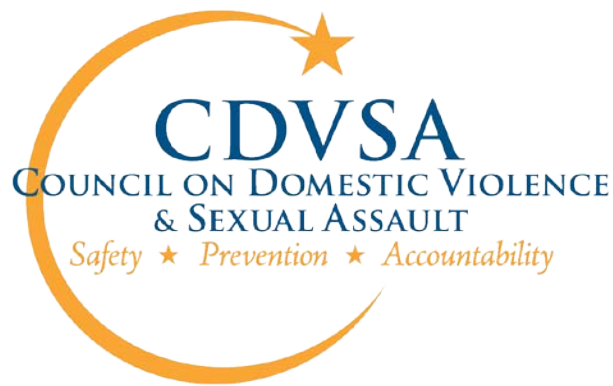


Council on Domestic Violence and Sexual Assault

Guide for Keeping CDVSA data

Data Definitions and Recommended Recordkeeping Practices



7/16/2018

Description—Everyone Read This

This document contains definitions for data collected for Alaska’s Council on Domestic Violence and Sexual Assault (CDVSA). It also contains instructions, rules, and suggestions for keeping data. Things that every person who keeps data should be aware of are highlighted, or, in the case of entire pages, outlined, in pastel green. Non-highlighted content is for reference.

The CDVSA’s ability to procure funding for victim service programs depends in part on the accuracy and completeness of Alaska’s data. If anything within this guide is unclear please feel free to contact Council staff with your questions at (907) 465-4673, we are always happy to assist!

Keeping CDVSA Data

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Program Participant Information

**Alaska Council on Domestic Violence and Sexual Assault
Program Participant Information Form**

Program Participant ID: _____

Date of Contact: ____/____/____
MM DD YY

Name _____ or ☐ Anonymous Contact
First Middle Last

Mailing Address _____
Box/Street City State Zip

Contact Phone(s) _____
(Only if safe to use) Cell Home Work Message

Program ID#'s of Participant's Children _____

PROGRAM PARTICIPANT DEMOGRAPHICS

Date of Birth: ____/____/____ or Approximate Age: ____
MM DD YY

Gender: ☐ Female ☐ Male ☐ Other _____

Race/Ethnicity: ☐ American Indian ☐ Native Alaskan ☐ Pacific Islander ☐ Other Race
(select all that apply) /Native Hawaiian
☐ Asian ☐ Black/African ☐ Caucasian/White ☐ Hispanic/Latino ☐ Race is Unknown
American /Not disclosed

SPECIAL CLASSIFICATIONS (Self Reported)

Does the Program Participant Self-Identify as:

Deaf/Hard of Hearing? ☐ Yes ☐ No ☐ Unknown

Homeless? ☐ Yes ☐ No ☐ Unknown

Immigrant/Refugee/Asylum Seeker? ☐ Yes ☐ No ☐ Unknown

LGBTQ? ☐ Yes ☐ No ☐ Unknown

A Veteran? ☐ Yes ☐ No ☐ Unknown

Having a Disability--Cognitive, Mental, or Physical? ☐ Yes ☐ No ☐ Unknown

Having Limited English Proficiency? ☐ Yes ☐ No ☐ Unknown

Other? If so please explain _____ ☐ Yes ☐ No ☐ Unknown

The information contained on this form is protected by state and federal confidentiality laws and cannot be released from Program records without informed written consent of the program participant or a court order. Contact the Program Executive Director or the ANDVSA Legal Advocacy Project before releasing this information.

Completed By: _____ on Date: _____

Reviewed By: _____ on Date: _____

Purpose:

The data collected on this form pertains to participant contact and demographic information.

Why does the form ask for this information?

The part of the form highlighted in pink is not required by the CDVSA, but your program may want to keep it for your program's purposes – i.e., contacting victims for safety checks and other services. The other information is required by the CDVSA and as part of the various reporting requirements that federal grant programs (VOCA, FVPSA, and VAWA)¹ request for their performance reports.

Should I tell program participants that these forms exist? Collecting data should always be second to providing actual services to program participants. However, program participants have a right to know that programs are keeping files that pertain to them. ANDVSA and CDVSA recommend, whenever possible, making program participants aware that information is being collected for statistical and funding purposes.

When must this form be filled out?

Use the Program Participant Information form when:

- ✓ Your program serves a new program participant, or
- ✓ A returning participant's contact information or community of residence has changed

In efforts to reduce the amount of paper work required by advocates and victim service staff, keep in mind that your program need not fill out this form each time a returning participant comes to utilize services. Only if your program finds it necessary to update a returning participant's contact or community of residence information should another Participant Information form be filed.

What is the required information on the Participant Information form?

¹ Victims of Crimes Act (VOCA), Family Violence Prevention and Services Act (FVPSA), and the Violence Against Women Act (VAWA)

The following fields must be filled out and are absolutely required when filling out a Participant Information Form:

- ✓ Program Participant ID
- ✓ Date of Contact
- ✓ DOB or approximate age
- ✓ Gender

If one of the above fields is not filled out, the CDVSA database will not accept the participant information. Also, keep in mind that the more information your program gathers, typically, the better. The information you gather will help in keeping victims safe, as well as provide meaningful information of the amount and types of populations that your program is serving, which is not only required for reporting purposes, but helps determine areas of need and financial allocations in the future.

The information about participant mailing address and phone number is entirely optional, and only there in case your program wants to track it using the forms/database.

Data Field Descriptions:

Program Participant ID (Required): The unique number that each program assigns to each individual served.

- ✓ In order to protect confidentiality, this number will be used on other forms and reports, rather than having names on all the forms. The program participant ID on this form should correspond to the ID on the Services Provided form and/or protective order form.
- ✓ The program participant ID should be assigned in accordance with a program's established policies and procedures. *It should not contain any personally identifying information, such as initials, date of birth, social security number, etc.*

Date of Contact (Required): The earliest date a person contacted the program seeking services.

Name: Enter program participant's name, partial name, or nickname.

Anonymous Contact: Check this box for in-person anonymous contacts (For Anonymous Phone Calls see pages 35-38).

Mailing Address and Contact Phone Numbers: Include as much information as you wish for your own program's purposes.

- ✓ This information will not be reported to CDVSA or anyone outside your program. It is contained on this form only for your program use, if desired, and is not mandatory.
- ✓ Make sure that you know which numbers are safe for your program to use when contacting participants.

Program Participant ID#'s of Participant's Children: Include for cross-referencing purposes.

Participant Demographic Information:

DOB or Approximate Age (Required): A date of birth or approximate age must be entered to meet federal reporting requirements.

Gender (Required): Mark "Female" or "Male." If a person identifies as a gender other than male or female, mark "Other", and if possible, provide a description.

Race / Ethnicity: Check any race/ethnicity that applies to the program participant. More than one box may be selected.

Recommendation: Because many individuals identify as more than one ethnicity, please give a program participant the chance to self-identify. Avoid marking "unknown" as this may cause inaccurate tracking of participants within the CDVSA database

Community of Residence: Enter the community where the program participant lives, if known.

Special Classification: (Self Reported)

Recommendation: Give a program participant a chance to self-disclose this information. Rather than asking about disabilities, which may under certain circumstances violate federal regulation, many programs practice the policy of asking individuals if they need any accommodations to make their stay more comfortable. It also may not be allowed to ask participants about their sexual orientation. This hasn't been clarified yet. At the least it needs to be VERY clear to participants that information collected in the Special Classification section will not and can not be used to screen participants out of services.

Deaf/Hard of Hearing? Mark "Yes" if program participant is deaf or identifies as hard of hearing.

Homeless? Mark "Yes" if program participant experiences homelessness. This does not include participants who have temporarily left their home to stay at the shelter and who expect to return to their homes when they leave temporary shelter

Immigrant, refugee or seeking asylum? Mark "Yes" if the program participant is not a citizen of the United States (a non-naturalized resident) or if fleeing from her home country and seeking safety or shelter in the United States. Mark "No" if this is not the case. Mark "Unknown" if the program participant does not disclose this information.

LGBTQ? Mark “Yes” if the program participant self identifies as having a sexual orientation other than heterosexual, or if they self-identify as having a gender identity other than “Cisgender” (“Cisgender” means “born in a body of the same sex that one currently identifies with”). While this information is valuable and programs are expected to attempt to collect it, asking about this directly may under certain circumstances violate federal regulation

A Veteran? Mark “Yes” if the program participant is a veteran.

Having a disability that limits daily activities? Mark “Yes” if program participant has a significant limitation in activities of daily living. This may include limitations due to vision or other physical impairment, developmental disabilities or mental illness.

Having Limited English Proficiency? Mark “Yes” if program participant has limited English proficiency. Individuals who do not speak English as their primary language and/or who have limited ability to read, write, or understand English may be counted as having limited English proficiency.

Other? If a program participant fits into an other special classification category, please provide an explanation/description.

Incident Information

Program Participant ID: _____

VICTIMIZATION TYPE

Primary Secondary		Primary Secondary		Primary Secondary	
<input type="checkbox"/>	<input type="checkbox"/>	Intimate Partner Violence	<input type="checkbox"/>	<input type="checkbox"/>	Bullying (Verbal, Cyber or Physical)
<input type="checkbox"/>	<input type="checkbox"/>	Family Violence	<input type="checkbox"/>	<input type="checkbox"/>	Human Trafficking: Labor
<input type="checkbox"/>	<input type="checkbox"/>	Adult Sexual Assault	<input type="checkbox"/>	<input type="checkbox"/>	Human Trafficking: Sex
<input type="checkbox"/>	<input type="checkbox"/>	Stalking/Harassment	<input type="checkbox"/>	<input type="checkbox"/>	Arson
<input type="checkbox"/>	<input type="checkbox"/>	Teen Dating Victimization	<input type="checkbox"/>	<input type="checkbox"/>	Burglary
<input type="checkbox"/>	<input type="checkbox"/>	Child Sexual Abuse/Assault	<input type="checkbox"/>	<input type="checkbox"/>	Kidnapping, Custodial
<input type="checkbox"/>	<input type="checkbox"/>	Child Physical Abuse or Neglect	<input type="checkbox"/>	<input type="checkbox"/>	Kidnapping, Non-Custodial
<input type="checkbox"/>	<input type="checkbox"/>	Adults Sexually Abused/Assaulted as Children	<input type="checkbox"/>	<input type="checkbox"/>	Identity Theft/Fraud /Financial Crime
<input type="checkbox"/>	<input type="checkbox"/>	Adult Physical Assault (Includes Aggravated and Simple Assault)	<input type="checkbox"/>	<input type="checkbox"/>	Hate Crime: <i>please circle one</i> Racial / Religious / Gender / Sexual Orientation / Other _____
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	Child Pornography
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	Other Vehicular Victimization (e.g., Hit and Run)
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	Survivors of Homicide Victims
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	Robbery
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	DUI/DWI Incidents
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	Elder Abuse or Neglect
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	Terrorism (Domestic/International)
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	Mass Violence (Domestic/International)
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	Other, please explain _____ _____

Date of Incident: ____/____/____
MM / DD / YY

Reported to Law Enforcement: ☐ Yes ☐ No ☐ Unknown

Location of Incident (town, village, or city): _____

PERPETRATOR INFORMATION (For additional perpetrators, attach the additional perpetrators form)Name: _____ Gender: ☐ Male ☐ Female ☐ Unknown

First Middle Last

Date of Birth (Probably available on Courtview): _____

Was the perpetrator under the influence at the time of the incident? ☐ Yes ☐ No ☐ UnknownIf yes, which substances? ☐ Alcohol ☐ Drugs ☐ Both ☐ Unknown**Perpetrator Race/Ethnicity** (Select all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Asian | <input type="checkbox"/> Pacific Islander/Native Hawaiian |
| <input type="checkbox"/> American Indian | <input type="checkbox"/> Hispanic/Latino |
| <input type="checkbox"/> Black/African American | <input type="checkbox"/> Other Race |
| <input type="checkbox"/> Native Alaskan | <input type="checkbox"/> Race is Unknown /Not Disclosed |
| <input type="checkbox"/> Caucasian/White | |

Relationship of Perpetrator to Program Participant (Select One):

- ☐ Current or Former Spouse or Intimate Partner
- ☐ Other Family or Household Member (In-law, Sibling, Grandparent, Roommate, etc.)
- ☐ Dating Relationship
- ☐ Acquaintance (Friend, Neighbor, Co-worker, Schoolmate, etc.)
- ☐ Stranger
- ☐ Unknown

The information contained on this form is protected by state and federal confidentiality laws and cannot be released from Program records without informed written consent of the program participant or a court order. Contact the Program Executive Director or the ANDVSA Legal Advocacy Project before releasing this information.

Completed By: _____ on Date: _____

Reviewed By: _____ on Date: _____

Purpose:

The purpose of this form is to gather as much pertinent incident information as possible, including the Incident Types, Perpetrator Profile, and other information.

Why does this form ask for this information?

The majority of the information sought on this form is required by one of three major federal grants VAWA, VOCA, and FVPSA. The Council on Domestic Violence and Sexual Assault (CDVSA) administers these federal funds and is itself mandated to “develop and implement a standardized data collection system on domestic violence, sexual assault, and crisis intervention and prevention.” AS18.66.050(5). Understanding the incidents victim service programs are grappling with aids CDVSA and other bodies in determining focus areas and fiscal needs and allocations.

When should this form be filled out?

The Incident Information form should be filled out when:

- ✓ A new Participant seeks services from your program
- ✓ A returning Participant’s Incident Type has changed
- ✓ A returning Participant is victimized by a different perpetrator

Please refer to the last page of this guide for a chart on when and what forms should be filled out for new and returning participants. Below are examples of when an Incident Information form should be filled out:

- *A participant who has never sought or received services from your program comes to your program seeking shelter and other services. Victim service staff should fill out a participant information and incident information form.*
- *A returning participant comes to your program seeking additional services and communicates to victim service staff that the incident type for which they are seeking services has changed from domestic violence to sexual assault. Victim service staff should fill out an incident information form reflecting the change in primary issue.*
- *A returning participant comes to your program seeking services and indicates that they have been victimized by a different perpetrator than the perpetrator indicated during their last request for victim services. Victim service staff should fill out a new Incident Information form reflecting the type of victimization and the new perpetrator information.*

What is the required information on the Incident Information form?

The following fields of information are absolutely required when filling out an Incident Information form:

- ✓ The date of incident (at the very least the year of the incident)
- ✓ Whether or not an incident was reported to law enforcement
- ✓ Incident location

Without the above fields filled in the CDVSA database may not be able to properly track participant's received services within the various canned reports available for your programs use.

Recommendation: Whenever possible avoid checking "Other" as this may also cause the CDVSA database not to properly report participants and their received services within the canned reports. This should be taken as a general rule, applicable whenever you are filling out information forms.

Also, if a participant really doesn't have an incident, like they are getting services solely for primary prevention, or entirely unrelated to abuse, for example to get a food box, or calling to "vent" just about life with no incident history, then an incident report doesn't need to be filled out.

Primary and Secondary Victimization Types

One incident may have multiple components. All types of victimization associated with an incident should be recorded on the incident form.

There are 2 classes of victimization: primary and secondary victimization, indicated by white and grey checkboxes on the form. **Primary victimization** is for when a participant is directly harmed, either physically or emotionally, by the actions of another. **Secondary victimization** is for when a person is affected by the repercussions of the victimization of someone else.

One incident can include victimization types from both classes. For example, a child who is displaced due to IPV against their mother that they didn't personally witness, would have the Intimate Partner Violence *Secondary* checkbox selected, and if they also were a primary victim of neglect, they would have the *Primary* checkbox selected for Child Physical Abuse or Neglect.

Recent findings about the effects of Adverse Childhood Experiences (ACEs) indicate that witnessing parental violence, whether or not a child is a direct target of that violence, directly causes measurable harm in the child. In the light of this finding, it makes sense for a child witness of familial/parental

intimate partner violence to have both primary and secondary checkboxes checked, for Domestic Violence (Intimate Partner or Family Violence).

What about Children?

If a family seeks service because of physical or sexual abuse suffered by a child, that child should be have a primary victimization recorded, and the other children and parents should have secondary victimization of the same incident type recorded.

A note about entering incident data in the database:

It is recommended that on the incident tab in the database, incident type is the last thing that is selected, before moving on to perpetrator information. This will prevent Microsoft Access from making a couple unnecessary validation popups as you move on to perpetrator information.

Victimization Type Definitions

a. Adults Sexually Abused/Assaulted as Children

Adult survivors of sexual abuse and/or assault suffered while they were children.

b. Adult Physical Assault Aggravated Assault: An unlawful attack by one person upon another for the purpose of inflicting severe or aggravated bodily injury. This type of assault usually is accompanied by the use of a weapon or by means likely to produce death or great bodily harm.

Simple Assault: Assaults and attempted assaults where no weapon was used or no serious or aggravated injury resulted to the victim. Intimidation, coercion, and hazing are included.

c. Adult Sexual Assault

Includes a wide range of victimizations; crimes that include attacks or attempted attacks generally involving unwanted sexual contact between victim and offender. Sexual assaults may or may not involve force and include such things as grabbing, fondling, and verbal threats. Also included is rape, which is defined as penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration of a sex organ by another person, without the consent of the victim; may also include penetration of the mouth by a sex organ by another person.

d. Arson

Any willful or malicious burning or attempting to burn, with or without intent to defraud, a dwelling house, public building, motor vehicle or aircraft, personal property of another, and so on.

e. Bullying (cyber, physical, or verbal)

Repeated, negative acts committed by one or more children against another. These negative acts may be physical or verbal in nature—for example, hitting or kicking, teasing or taunting—or they may involve indirect actions such as manipulating friendships or purposely excluding other children from activities. Implicit in this definition is an imbalance in real or perceived power between the bully and victim. Examples of cyber bullying include mean text messages or e-mails, rumors sent by e-mail or posted on

social networking sites, and embarrassing pictures, videos, Web sites, or fake profiles.

f. Burglary

The unlawful entry of a structure to commit a felony or theft. The FBI's Uniform Crime Reporting (UCR) program includes three subclassifications: forcible entry, unlawful entry where no force is used, and attempted forcible entry. The UCR definition of "structure" includes apartment, barn, house trailer or houseboat when used as a permanent dwelling, office, railroad car (but not automobile), stable, and vessel (i.e., ship).

g. Child Physical Abuse and Neglect This may include physical abuse that is nonaccidental physical injury (ranging from minor bruises to severe fractures or death) as a result of punching, beating, kicking, biting, shaking, throwing, stabbing, choking, hitting (with a hand, stick, strap, or other object), burning, or otherwise harming a child, that is inflicted by a parent, caregiver, or other person. Such injury is considered abuse regardless of whether the caregiver intended to hurt the child. Physical discipline, such as spanking or paddling, is not considered abuse as long as it is reasonable and causes no bodily injury to the child.

h. Child Sexual Abuse and Assault

This may include activities such as fondling a child's genitals, penetration, incest, rape, sodomy, indecent exposure, and exploitation through prostitution by a parent, caregiver, or other person. Includes teen sexual assault.

i. Child Pornography Any visual depiction, including any photograph, film, video, picture, drawing, or computer or computer-generated image or picture, which is produced by electronic, mechanical, or other means, of sexually explicit conduct, where: (1) its production involved the use of a minor engaging in sexually explicit conduct; (2) such visual depiction is, or appears to be, of a minor engaging in sexually explicit conduct; (3) such visual depiction has been created, adapted, or modified to appear that an identifiable minor is engaging in sexually explicit conduct; or (4) it is advertised, distributed, promoted, or presented in such a manner as to convey the impression that it is a visual depiction of a minor engaging in sexually explicit conduct.

j. Intimate Partner Violence and/or Family Violence

A crime in which there is a past or present familial, household, or other intimate relationship between the victim and the offender, including spouses, ex-spouses, boyfriends and girlfriends, ex-boyfriends and ex-girlfriends, and any family members or persons residing in the same household as the victim. Involves a pattern of abusive behavior in any relationship that is used by one partner to gain or maintain power and control over another intimate partner. Domestic violence can be physical, sexual, emotional, economic, or psychological actions or threats of actions that influence another person. This includes any behaviors that intimidate, manipulate, humiliate, isolate, frighten, terrorize, coerce, threaten, blame, hurt, injure, or wound someone. It is classified as either Intimate Partner Violence, or Family Violence, depending on the nature of the relationship of the perpetrator to the participant.

k. DUI/DWI Incidents Driving or operating a motor vehicle or common carrier while mentally or physically impaired as the result of consuming an alcoholic beverage or using a drug or narcotic.

l. Elder Abuse/Neglect

Also known as elder mistreatment, generally refers to any knowing, intentional, or negligent act by a family member, caregiver, or other person in a trust relationship that causes harm or creates a serious

risk of harm to an older person. Elder abuse may include abuse that is physical, emotional/psychological (including threats), or sexual; neglect (including abandonment); and financial exploitation. This is a general definition; state definitions of elder abuse vary. Some definitions may also include fraud, scams, or financial crimes targeted at older people.

m. Hate Crime (Racial/Religious/Gender/Sexual Orientation/Other)

A criminal offense against a person or property motivated in whole or in part by an offender's bias against a race, religion, disability, ethnic origin, or sexual orientation.

n. Human Trafficking: Sex/Labor

Inducing a person by force, fraud, or coercion to participate in commercial sex acts, or the person induced to perform such act(s) has not attained 18 years of age. It also covers obtaining a person through recruitment, harboring, transportation, or provision, and subjecting such a person by force, fraud, or coercion into involuntary servitude, peonage, debt bondage, or slavery (not to include commercial sex acts).

o. Identity Theft/Fraud/Financial Crimes Identity theft occurs when someone wrongfully obtains another's personal information without their knowledge to commit theft or fraud. Fraud and financial crimes include illegal acts characterized by deceit, concealment, or violation of trust and that are not dependent upon the application or threat of physical force or violence. Individuals and organizations commit these acts to obtain money, property, or services; to avoid the payment or loss of money or services; or to secure personal or business advantage.

p. Kidnapping (noncustodial)

Occurs when someone unlawfully seizes, confines, inveigles, decoys, abducts, or carries away and holds for ransom or reward, by any person, except in the case of a minor by the parent thereof.

q. Kidnapping (custodial)

Occurs when one parent or guardian deprives another of his or her legal right to custody or visitation of a minor by unlawfully taking the child. The definition and penalties of custodial kidnapping vary by state. In some states, kidnapping occurs only if a child is taken outside of the state and/or if an existing custody order is intentionally violated. In all cases, international custodial kidnapping is a federal offense.

r. Mass Violence: Domestic/International

An intentional violent criminal act that results in physical, emotional, or psychological injury to a sufficiently large number of people to significantly increase the burden of victim assistance and compensation for the responding jurisdiction.

s. Other Vehicular Victimization

May include hit-and-run crimes, carjacking, and other vehicular assault.

t. Robbery

Taking or attempting to take anything of value from the care, custody, or control of a person or persons by force or threat of force or violence and/or by putting the victim in fear.

u. Stalking/Harassment

Individuals are classified as victims of stalking or harassment if they experienced at least one of the

behaviors listed below on at least two separate occasions. In addition, the individuals must have feared for their safety or that of a family member as a result of the course of conduct, or have experienced additional threatening behaviors that would cause a reasonable person to feel fear. Stalking behaviors include making unwanted phone calls; sending unsolicited or unwanted letters or e-mails; following or spying on the victim; showing up at places without a legitimate reason; waiting at places for the victim; leaving unwanted items, presents, or flowers; and posting information or spreading rumors about the victim on the Internet/social media, in a public place, or by word of mouth.

v. Survivors of Homicide Victims Survivors of victims of murder and voluntary manslaughter, which are the willful (intent is present) killing of one human being by another.

w. Teen Dating Victimization

Teen dating violence is defined as the physical, sexual, psychological, or emotional violence within a teen dating relationship, including stalking. It can occur in person or electronically and might occur between a current or former dating partner.

x. Terrorism: Domestic The term terrorism means an activity that...(1) involves a violent act or an act dangerous to human life that is a violation of the criminal laws of the United States or of any State, or that would be a criminal violation if committed within the jurisdiction of the United States or any State; and (2) appears to be intended...(a) to intimidate or coerce a civilian population, (b) to influence the policy of a government by intimidation or coercion or (c) to affect the conduct of a government by assassination or kidnapping (18 U.S.C. 3077).

y. Terrorism: International

The *Antiterrorism and Emergency Reserve Fund Guidelines for Terrorism and Mass Violence Crimes* refers to the term terrorism, when occurring outside of the United States, as international terrorism to mean an activity that...(1) involves a violent act or an act dangerous to human life that is a violation of the criminal laws of the United States of any State or that would be a criminal violation if committed within the jurisdiction of the United States or of any State; (2) appears to be intended...(a) to intimidate or coerce a civilian population; (b) to influence the policy of a government by intimidation or coercion; or (c) to affect the conduct of a government by assassination or kidnapping; and (3) occur primarily outside the territorial jurisdiction of the United States, or transcend national boundaries in terms of the means by which they are accomplished, the persons they appear intended to intimidate or coerce, or the locale in which their perpetrators operate or seek asylum (18 U.S.C. 2331).

z. Violation of a Court Order

This is defined by state or jurisdiction.

Further Incident Information:

Date of Incident (*Required*): Indicate when the incident **that prompted the program participant to seek services** took place. In the database, this field is formatted to accept as much data as you can gather. Therefore, you may enter the specific date or a more general time, such as the month and year of the incident or simply the year of the incident. Any of the following formats are acceptable:

- ✓ 04/11/2009
- ✓ 04/2009
- ✓ 2009

Note: You cannot enter a day of incident without the year AND month. Similarly, you cannot enter a month without a year.

Location of Incident: Indicate where the incident took place. If you select a button that has a text box (Other location within Alaska, or Other location outside of Alaska), please fill out the text box, even if you have to write “unknown”

Reported to Law Enforcement: Check “Yes” or “No” or “Unknown”

Perpetrator Incident Information:

Perpetrator Name: Indicate name if known.

Perpetrator Gender: Enter the gender of the perpetrator, if known.

Approximate Perpetrator Age: If age is unknown, enter an approximate age.

Race/Ethnicity: Select all that apply. More than one category may be selected. If a program participant does not provide this information, mark “unknown.”

Relationship of Perpetrator to Program Participant: Please select the one that best applies for the incident in question. Only one relationship code may be selected for a perpetrator. If a program participant is victimized during the same incident by more than one perpetrator, choose one relationship code for each perpetrator.

- 1. Current or former spouse or intimate partner:** Choose this if the perpetrator is a person with whom the program participant has a child in common **OR** is a person who is cohabitating with or has cohabitated with the program participant as a spouse or partner. *Note that this is different from the dating relationship described in number three below.*
- 2. Other family or household member:** Choose this if the perpetrator is a family member or is any person who is related to the program participant by blood, kinship or relationship. “Family” is defined to include both traditional and non-traditional family structures, including foster parents, grandparents and other relatives, extended family, clans, etc. “Other household members” are any persons who share or have shared a household with the program participant, including roommates and personal care attendants.
- 3. Dating relationship:** Choose this if the program participant and perpetrator were involved in a social relationship of a romantic or intimate nature at the time of the incident.
- 4. Acquaintance:** Choose this if the perpetrator is a person known to the program participant, including a peer, co-worker, supervisor, friend, classmate, etc.

5. **Stranger:** Choose this if the perpetrator was unknown to the program participant at the time of the incident.
6. **Relationship Unknown:** Choose this category **ONLY** if the relationship of the perpetrator to the program participant cannot be described by any of the preceding five descriptions.

Was the perpetrator under the influence at the time of the incident? Check “Yes,” “No,” or “Unknown.”

If yes, which substances? Check “Alcohol,” “Drugs,” “Both,” or “Unknown”

More than one perpetrator for the same incident?

If a program participant is seeking services because of an incident during which he or she was victimized by more than one perpetrator, record the second perpetrator on the Additional Perpetrator Form. You may attach additional paper to the green to document more than two perpetrators if necessary. The CDVSA database has the ability to list an unlimited number of perpetrators for the same incident.

Multiple perpetrators, multiple incidents?

If a program participant experiences two separate types or incidents of victimization perpetrated by different individuals, fill out two incident information forms. For example, if a woman is being abused in her current relationship (primary issue: domestic violence) but is then raped by an acquaintance (primary issue: sexual assault), fill out two incident forms, one for each separate and unrelated incident.

Confidentiality Clause

Completed By and Date: The program staff person who completes the form should print her name and indicate when the form was completed.

.....

Please note the confidentiality statement at the bottom of the form. This information must be protected and not released as stated on the form.

.....

Date Form Reviewed: The program staff person who enters the information on the form into the program’s database should note the date here.

A Note Regarding Disclosure to Program Participants:

Collecting data should always be second to providing actual services to program participants. However, program participants have a right to know that programs are keeping files that pertain to them. ANDVSA and CDVSA recommend, whenever possible, making program participants aware that information is being collected for statistical and funding purposes.

Notes Regarding Storage of Forms:

1. Forms should be kept organized in a secure location, as they may be reviewed during a CDVSA program audit and will be useful for staff when files are needed for reference purposes. You must store physical copies of forms for a year after the reporting period that they belonged to has completed.
2. Information from the forms will need to be entered into the CDVSA database. Program should develop standard procedures for entering form information into the database.
 - a. Note that identifiable program participant information will not be released outside of your program.

Services Provided Form

Council on Domestic Violence and Sexual Assault

Program:

[illegible]

Purpose:

The data collected on the Services Provided Report Form (hereafter referred to as the “Services Provided Form”) allows your program and CDVSA to track the frequency and extent of services provided to program participants. Programs will enter the individual data each month in order to report monthly aggregate data to CDVSA.

Why do we track services provided this way?

In order for CDVSA to collect *meaningful* data, programs needed to define and track services provided in the same way. This will result in a more accurate portrait of advocacy in Alaska. Definitions for services have been decided on through a collective effort in 2017 and 2018. If you have a good reason why the definitions should be changed, please contact the CDVSA’s Research Analyst. If most Victim Service Programs agree that this is a useful change, the definition can be revised.

How often may a particular service be documented?

For all services other than phone calls, mark **one tally per day** that a service is rendered, regardless of how often it is rendered during that day. This means that, though a service may be rendered many times in one day to one participant, no service may be counted for the same program participant more than 31 times in the same month. The CDVSA database will not allow more than 31 instances of the same service to be documented for the same program participant. The one exception to this method is the hotline, which tracks calls on a per-call basis.

Hotline Phone Calls

.....
Note: Track phone calls on a per-call basis.
.....

Why are hotline calls tracked on a per-call basis?

Federal reporting guidelines require that hotline calls be tracked individually. There is no limit to the number of hotline calls that may be tallied for a program participant on a particular day, nor is there a monthly limit on the database. For example, one program participant may access crisis intervention over the telephone three times in a given day.

Why must hotline calls be counted as Crisis Calls or Information and Referral Calls?

Federal reporting guidelines require that the number of Crisis Calls be reported separately from any other service or type of advocacy.

Crisis Phone Call: Calls received by a program’s hotline in which crisis intervention and/or counseling are the primary purpose of the call. **Mark on a per-call basis.**

Info & Referral Phone Call: Calls received by program’s hotline in which services and available support are identified. This does not include calls during which counseling or crisis intervention is the primary function of the call. **Mark on a per-call basis.**

Recommendation: We all know that a hotline call is rarely just about crisis intervention. More often than not, an advocate will make some sort of referral for additional service before hanging up. Therefore, we recommend classifying calls in which both crisis intervention AND information and referral occur as crisis calls. Advocates can then track additional types of service provided during the call.

“Housekeeping” Calls:

Some calls received by a program don’t necessarily fall into either category. An example of this might be if a program participant calls only to let an advocate know she’ll be late for group. If she is not in crisis and no information or referrals are given, the call should not be classified under either category.

Calls from other service providers on behalf of a program participant:

If other service providers contact your program with or on behalf of a program participant, the call may be classified as either a Crisis Phone Call or, more commonly, an Info and Referral Phone Call.

Note: If a service provider is calling on behalf of an anonymous person, use the hotline log.

Calls that don’t go into the Database

If you find that many of your calls are not going into the database, contact the CDVSA’s Research Analyst, and you two can set up a method to assure that hotline calls are being reported accurately

Incident Service Connection

On each service sheet you have the option to manually set which incident your service is connected to. The database system automatically sets the incident to be the most recent one before the services were provided. However, if the services that month are primarily for a different incident, you may set the connection manually, on the Services data entry tab of the database.

Service Definitions

1) Information About The Criminal Justice Process

Direct communication to the participant about the process of crime investigation, crime charges, the court hearing timeline, what happens during court hearings, plea agreements, sentences, trials, what the public defender does, what the district attorney does, what different statutes mean. This can be provided in writing, over the phone, or in person.

2) Information About Victim Rights

Provision of information about victims' rights, how to obtain notifications, etc. This includes providing information about the Office of Victims' Rights (OVR). Information provided about VCCB claims should be counted in #38, and not here. This can be provided in writing, over the phone, or in person.

3) Referral To Other Victim Service Programs

Referral to DV/SA victim service programs or shelters, including all ANDVSA victims service programs, and similar programs. Does not include referral to VCCB, since that is counted in #38

4) Referral To Other Services, Supports, Resources

Referral to other services, supports, and resources, including legal, medical, language, faith-based organizations, tribal, address confidentiality programs, public assistance, housing, counseling agencies, employment, childcare, law enforcement, WIC/Food, etc.

5) Victim Advocacy/Accompaniment To Emergency Medical Care

Coordination of and advocacy related to emergency medical care; this includes accompanying the participant at the place where the emergency medical care is provided or during transportation to that care. This is for any type of emergency medical care, for any participant--the medical emergency does not need to be a direct result of victimization. Care for mental health emergencies is included. Forensic medical care should be counted in #6. Medical care that is not related to an emergency would go in Individual Advocacy (#8).

6) Victim Advocacy/Accompaniment To Medical Forensic Exam

Coordination and advocacy related to medical-forensic exam services; this includes accompanying the participant at the place where the medical-forensic services are provided or during transportation to that service. This includes SART exams, and strangulation victims seen by forensic nurses. This includes initial and follow-up exams, and follow-up advocacy directly related to the exam process. This can be for victims of any age.

7) Law Enforcement Interview Advocacy/Accompaniment

Being with the participant while they are being interviewed by law enforcement or during transportation to those interviews. Coordination or advocacy related to those interviews. This includes advocacy prior to, during or after interviews. Accompaniment during Glass warrants. Multi-disciplinary meetings. Informing participants about rights relating to possible criminal issues or charges against the participant.

8) Individual Advocacy

Individual advocacy includes the following: Case management; Coordination on behalf of a participant; Forwarding mail to participants; Return or disposal of personal property or effects; Discussing housing options with participants; Working with a victim to assess the impact of the crime; Management of practical problems created by the victimization; Identification of participant's needs; Identification of resources available to the participant; Provision of information, advocacy, and follow-up contact for continued services, as needed; Public or tribal assistance (Referral for services, assistance with applications for assistance, appeals of adverse decisions and accompaniment to appointments. This could include, but is not limited to: food stamps, Medicaid, Denali Kid Care, child care assistance, and temporary or general aid or assistance); Assistance with other applications, school, and grants. This includes basically any interaction between advocate and participants. If a provided service fits entirely into a more specific category, then it doesn't also need to be counted here. Referrals alone should be counted in #3 or #4.

9) Performance Medical Forensic Exam, etc.

Performance of medical forensic exam or interview, or medical evidence collection. This service is only provided by programs that employ medical professionals.

10) Immigration Assistance (e.g. Special Visas, etc.)

Any interactions with participants that include discussion of or which are affected by the participant's immigration status, and provision of options that are available to them because of their immigration status should be counted here. This includes advocacy, coordination, and direct assistance. Any non-citizen exploitation or trafficking should be included here. Includes assistance with special visas, continued presence applications, and all other immigration relief.

11) Intervention with Employer, Creditor, etc.

Intervention with employer, creditor, landlord, or academic institution. This includes speaking on behalf of participants, as well as asking questions to explore options which are then relayed to the participant. This includes communication with the employer, creditor, etc. in person, over the phone, or in writing. This is for intervention with people or institutions that have a pre-existing relationship with the participant--it does not include assistance with seeking new employment, job training, or education.

12) Activity With Individual Child

Interactions with an individual child that don't fall clearly into another service category (such as individual advocacy (#8)). This includes any activity--coloring, chatting, etc. If you are watching a participant's child for them, mark the service as provided to the child and to the parent.

13) Group Activity With Children

All activities for a group of children that don't fall clearly into another service category (such as support groups (#21), or therapy (#22)). This includes recreational activities, subsistence activities, etc. A service should be counted for each child that takes part in the activity. If you are watching a participant's child for them, mark the service as provided to the child and to the parent.

14) Other Child or Dependent Care Assistance or Coordination.

Providing care and supervision for participants who are over age 18 who have a disability. Providing information, coordination, or assistance related to child or dependent care, for example helping a participant with a childcare application. Provision of childcare itself should be counted in #12 or #13.

15) Transportation Assistance or Coordination

Transportation assistance includes provision and coordination of services. Includes taxi, air, boat, car transport, and other means. For taxis, air transport, and other means that require direct payment, Emergency Financial Assistance (#23) should also be marked. Dividing between emergency and non-emergency categories is optional. **Emergency Transportation** is transportation paid by the program to remove a program participant from an unsafe situation. **Non-Emergency Transportation** is provided to take program participants to appointments, school or to access other non-emergency services. This may include taxi fare, bus tokens, or rides given in an agency or personal vehicle.

16) Interpreter Services

This includes provision of language interpretation by staff or volunteers. This includes unofficial interpretation by bilingual staff, and interpretation that is not instantaneous direct translation but which may be, for example, explaining something in a participant's first language. This is also counted any time the staff connects participants with interpreter services, even if staff themselves are not providing the interpretation.

17) Crisis Intervention (In-Person, Includes Safety Planning, etc.)

In-person interaction during which an advocate identifies, assesses, and intervenes with an individual in crisis so as to reduce the effects of the crisis in her/his life. This will be used during the great majority of intakes. It would also be used for walk-in participants, and at any time during residency if a crisis develops in the participant's life or any time safety planning is covered. If law enforcement are contacted to request a welfare check after in-person contact with a participant, that would be counted here.

18) Hotline/Crisis Line Counseling

Crisis Phone Call: Calls received by a program's hotline in which crisis intervention and/or counseling are the primary purpose of the call. Mark on a per-call basis.

19) On-Scene Crisis Response (e.g., Community Crisis Response)

Responding to crises in homes, at the store, post office, street, park, airport, school, police station, OCS, or hospital—any places that are not our program. Responses can be provided by one or more employees/volunteers at your program, or by a broader group of professionals/para professionals responding jointly. This includes crises that involve single victims or multiple victims.

20) Individual Counseling

Counseling by advocates or licensed professionals, for safety, relationships, making good choices, organizing, etc. The provider of this service does not need to be professionally licensed.

21) Support Groups (Facilitated or Peer)

Support Groups (Facilitated or Peer)

22) Other Therapy (Traditional Healing, Art or Play Therapy, etc.)

Therapy, including traditional, cultural, or alternative therapy/healing; art and crafts; writing; play therapy; yoga; etc. Subsistence and cultural activities provided with therapeutic intent would be counted here. Not restricted to provision by licensed professional therapist.

23) Emergency Financial (Includes Payment for Supplies, Services)

Emergency financial assistance includes emergency loans and petty cash, payment or vouchers for items such as food and/or clothing, changing windows and/or locks, prophylactic and non-prophylactic meds, durable medical equipment, payment of rent or utilities, etc. Taxis and plane rides paid for by the program should go under Transportation (#15) AND Emergency Financial (#23). Provision of an item that the program has purchased, such as furniture, should be counted here. Provision of small items associated with staying in shelter such as a toothbrush do not need to be marked here, since it is being recorded that the participant stayed in shelter.

24) Child Protective Services

Referral to and communication with state or tribal child welfare agencies on behalf of an adult or child program participant. This is not just limited to submitting reports of harm, but can include assisting a participant to communicate and work with these agencies.

25) Adult Protective Services

Referral to and communication with state or tribal adult or elder welfare agencies on behalf of an adult program participant. This is not just limited to submitting reports of harm, but can include assisting a participant to communicate and work with these agencies.

Shelter: For any given night, a person can only have transitional, emergency, OR overflow. If a person was expecting to stay the night, and a bed has their stuff around it, and they return the next night, then it can be counted as a night, but make sure this doesn't get out of control.

26) Emergency Shelter or Safe House

Providing program participant with housing in a safe, sometimes confidential place that provides 24-hour access to living quarters for a limited amount of time. Emergency shelter can also be safe-homes (generally private homes allowing a program participant who is in immediate danger to stay for a short period of time on an emergency basis) and hotel accommodations.

27) Overflow Shelter

This is the same as emergency shelter, except night count here when the shelter is over capacity, and only the over-capacity nights should be counted here. That is, if a shelter has 15 beds, but 17 people are sleeping there, and 2 are on mats on the floor, then for that night, 15 emergency nights should be recorded, and 2 overflow nights

28) Transitional Housing

Providing program participant with housing either in an apartment or single-family unit. This housing often includes a case management component that would include a work plan for what the program participant will accomplish while staying at the facility. A program without a transitional housing program could occasionally count this, if the program funds housing that is not emergency shelter, because the participant doesn't need emergency shelter but needs something before getting permanent housing. This service should only be counted when a transitional housing night has been provided. If a participant stays a night at accommodations provided through your program, it should be counted as either emergency shelter, or transitional housing, but not both.

29) Relocation Assistance

This includes: Mailing participant's personal belongings to a new town; Moving participant and/or their belongings from shelter to a home or from shelter to shelter; Assisting with moving expenses (would also count this in Emergency Financial Assistance (#23)); Conducting research for the participant about new location—bus routes, schools, resources, etc. Assistance with housing applications, including assistance getting into transitional shelters at a different program. This can include moves within the same city or town, or to another locality. If transportation is provided, mark it in (#15)

30) Notification of Criminal Justice Events (Case Status, Arrest, etc.)

Notifying the participant about criminal justice events such as case status, arrest, court proceedings, case disposition, release, etc.

31) Victim Impact Statement Assistance

Providing information/education on what a victim impact statement is; advocacy or assistance in preparing a statement or delivering it to the prosecutor's office or the Office of Victims' Rights (OVR).

32) Assistance with Restitution (All Efforts)

Providing assistance with restitution, including assistance in requesting restitution, and assistance when collection efforts are not successful.

33) Civil Legal Assistance in Obtaining Protection Order

Providing information about and assistance with filing temporary restraining orders, injunctions, other protective orders, modifications to existing orders, elder abuse petitions, and child abuse petitions. Meeting with the participant to talk about resolving their current order or to help them prepare for an upcoming hearing. Accompanying participant during court hearings. Acquiring and assisting with pro bono applications for long-term DV protective orders. These services are typically provided by advocates.

34) Civil Legal Assistance with Family Law Issues

Any assistance with family law issues. Examples include providing information about child custody, separation, divorce, etc.; filling out an application; court accompaniment.

35) Other Emergency Justice-Related Assistance

Any service related to civil or criminal justice that is completed on an unscheduled, and very time-sensitive basis, such as filing for restraining or protective orders outside of court hours, and obtaining emergency custody orders and visitation rights. For services that fit in both this and another category (for example, #33), both categories should be counted.

36) Prosecution Interview Advocacy/Accompaniment

Accompaniment to and during prosecution interview, and advocacy related to it. This includes accompaniment with prosecuting attorney and with victim/witness. Provision of information and advocacy prior to and following these events. May involve communication with public defenders, and with prosecutors.

37) Criminal Advocacy/Accompaniment

The following services, when provided for the purpose of supporting a participant involved in a criminal case, either as victim or accused: Checking court calendar, recent criminal charges filed, CourtView, vinelink and AST Dispatch web pages; communicating with CAC and SART multi-disciplinary teams (MDT) at MDT meetings; communicating with law enforcement agents, public defenders, and prosecutors; being with participant at criminal case hearings. Includes court accompaniment, advocating for participant to prosecutor/OVR in reference to testifying, plea deals, subpoenas, etc.

38) Other Legal Advice and/or Counsel

Advocacy or information related to the legal system that doesn't fit entirely into other categories. Some examples are animal control issues, evictions if it has reach the level of legal proceedings, and issues relating to accidents. This is not restricted to services provided by law professionals.

39) Assistance with VCCB Claims

Providing the participant with information about crime victim compensation, or assisting the participant with completing the required forms, gathering the needed documentation, or any other part of the of the VCCB claims process. This may also include follow-up contact with the victim compensation agency on behalf of the program participant. This service shouldn't be marked if no service was provided other than provision of a VCCB application.

40) Unmet Request For Shelter Due To Capacity Issues

Unmet request for shelter due to program reaching capacity.

41) Unmet Requests For Other Services Due To Capacity Issues

If a service requested is a service that the program is funded to provide, but the program is unable to provide that service due to inadequate funds, inadequate staffing, inadequate facilities, inadequate training, or any other issue of capacity, record it here. It is important to record these because it can indicate when more support or resources are needed.

Safety checks

Includes crime victim contact immediately following criminal case in order to check on their well-being. Follow-up contacts for all participants following initial services including after discharge from shelter or transitional housing. Any other service provision that checks on the current well-being of the participant.

Other hotline calls

Contacts to program about participants—typically from law enforcement (activating SART, for example), OCS, Hospital staff, Housing Authority, BBNA, airlines, etc. This also applies to family/friends/neighbors calling for participants, if there is not enough information about them to generate their own participant file (where they would be a secondary victim in whatever the issue is). This is for non-crisis calls where there is information, referrals and/or brief advocacy provided to individuals that do not have program participant files.

Defining and Tracking Partial Service and Referrals: Introduction & Recommended Practices (OLD)

ALASKA COUNCIL ON DOMESTIC VIOLENCE AND SEXUAL ASSAULT
PARTIAL SERVICE AND REFERRALS FORM

Month/Year _____

[illegible]

Revised 10/01/2007

Selected Definitions - Referrals

Medical Intervention: Providing information about medical services other than drug or alcohol treatment that are available in the community

Law Enforcement: Providing option of contacting troopers, VPSO, or city police for assistance in reporting a crime, escorting participant when retrieving possessions, etc.

Batterers' intervention: Providing information about batterers' programs within the community.

Definitions - Reasons Partially Served

Program reached capacity: Program is operating at full capacity. Victims/survivors may be placed on a waiting list.

Need not documented: Determination is made that there is not sufficient basis to provide the services requested by the victim/survivor. For example, a victim/survivor requests shelter even though she has had not contact or threats from her batterer for more than two years and she is not in danger. Therefore, the need for shelter is not documented, even though she is a victim/survivor.

Did not meet eligibility or statutory requirements: Victim/survivor does not meet eligibility requirements of program or does not meet requirements of statute. For example, a victim/survivor requests help with a divorce, but has not met statutory residency requirements to file for a divorce in the jurisdiction.

Program rules not acceptable to victim/survivor: Although eligible for services under the grant, a victim/survivor is not willing to comply with rules of the program. For example, a program requires eight individual counseling sessions and the victim/survivor does not want to attend individual counseling.

Services not appropriate for victim/survivor: For any reason, the services available under the grant are not appropriate for a victim/survivor. For example, although support groups are offered under the grant for survivors of sexual assault, a victim/survivor requesting support group services is not served because it is clinically determined that the victim/survivor is not appropriate for the group.

Transportation problems: Victim/survivor is unable to arrange for transportation to receive services. This includes situations in which public transportation is available but cannot be paid for.

Conflict of interest: The program cannot serve the victim/survivor because current or previous relationships with that victim/survivor or other parties related to that victim/survivor would interfere with the ability of the program to serve that victim/survivor. For example, the program is currently serving a victim/survivor. Her partner, identifying as your client's victim, requests to join the same support group as the person you are already serving.

Services inappropriate or inadequate for people with substance abuse problems: Staff are not able, for any reason, to provide appropriate or adequate services for victims/survivors with substance abuse problems.

Services inappropriate or inadequate for people with mental health problems: Staff are not able, for any reason, to provide appropriate or adequate services for victims/survivors with mental health problems.

Services not available for victims/survivors accompanied by male adolescent: Although shelter services are provided under the grant, your shelter has rules prohibiting adolescent males from residing in the shelter, and the victim/survivor refuses to go to the shelter without the child. Therefore, the victim/survivor is denied shelter services.

Inadequate language capacity (including signing): Interpreter services not available or not available at the time the victim/survivor is seeking services. Victims/survivors may be placed on a waiting list to receive interpreter services, but have not been served by the end of the current reporting period.

Insufficient/lack of culturally appropriate services: Services currently provided under the grant are not culturally appropriate for the victim/survivor.

Insufficient/lack of services for people with disabilities: The services provided under the grant are not accessible to people with disabilities. For example, a shelter does not allow a care attendant to accompany a victim/survivor to the shelter, which prevents her from being able to use shelter services.

Geographic or other isolation of victim/survivor: Staff or volunteers cannot serve the victim due to geographic distance or isolation.

Hours of operation: Hours during which the program provides services are not consistent with the hours the victim/survivor is available to receive needed services.

Purpose:

Federal funders want to get a sense of what barriers prevent program participants from fully accessing services that programs are funded to provide. *This information could be useful so that we can identify common needs across the state and work to offer more services.*

However at this point in time the CDVSA does not require that this data be kept in the CDVSA database.

Important note regarding the sensitive nature of this information:

Reporting both the referrals made to an individual **and** reasons for being unable to fully serve an individual are federal requirements. However, this sensitive information could hurt a program participant if her file is subpoenaed. Because of this, executive directors agree this information **should not be kept in a program participant's file.**

How should this information be tracked?

As of September 2007 CDVSA has not mandated a particular way to track this information. **However, the information must be tracked.** Your program may choose to track this information by using CDVSA Partial Service & Referrals Form on the title page of this section, or by using another method.

CDVSA has agreed that until further notice, each program may develop and use its own policies and procedures for capturing this data, subject to the following requirements:

- Each program shall develop a written protocol explaining how the program is capturing and reporting the subject data;
- Each program may develop its own forms and/or integrate collection of this data into existing forms. These forms must conform to the methodology stated by the program in capturing this data; and
- Each program shall maintain records of partial service and referrals in an orderly fashion, ready for review during any CDVSA field audit.

Recommended practices for tracking referrals and reasons for partial service:

Anonymous Hotline Callers: This information may be tracked using the code on the reverse side of the CDVSA Hotline Log. See **Tracking Anonymous Callers & CDVSA Hotline Log** for more details.

Resident Program Participants: This information may be documented by the primary advocate at the end of a program participant's stay. At that point, any referrals will have been made and any barriers to full access of services will have been revealed.

Non-resident Program Participants: This information may be documented by the primary advocate one month after a new green form has been filled out.

Defining and Tracking Partial Service and Referrals: Determining Extent of Service Provided

Program Participant Fully Served: If a program participant received all needed services that you are funded to provide, that participant is fully served. No further information is required.

Note: A program participant does not have to be served in all 30 categories of the services provided form in order to be counted as “fully served.” If a program participant does not request or need a service that you are funded to provide, you should still count the participant as “fully served” if you are able to meet all other requests for services you are funded to provide.

Program Participant Partially Served: If a program participant requested services you are funded to provide and received some, but not all, of the requested services you are funded to provide, that participant is partially served. Your program must track the reasons the participant was not fully served.

-
- Program participants that do not return to complete program is *NOT* a reason to mark “partially served.” If the program participant received all of the services that she requested and it was the participant, rather than the program, who chose to discontinue services, this individual should be counted as “fully-served” rather than “partially served.”
 - Unmet request for a service you are not funded to provide is *NOT* a reason to mark “partially served.” If a program participant requests a loan of \$1,000 to make a housing deposit and your program is not funded to provide loans of this amount, you should not mark this participant as “partially served.” You are not funded to provide the service that she requested.
-

Defining and Tracking Partial Service and Referrals: Reasons Participant Not Fully Served

Below is a comprehensive list of the reasons that a program participant may not be fully served. Abbreviated versions of these reasons are available on the reverse side of the Partial Service and Referral Form.

CDVSA Partial Service & Referrals Form.

Check all that apply.

Program reached capacity: Program is operating at full capacity. Program participant may be placed on a waiting list.

Need not documented: Determination is made that there is not sufficient basis to provide the services requested by the program participant. For example, a participant requests shelter even though she has had no contact or threats from her batterer for more than two years and she is not in danger. Therefore, the need for shelter is not documented.

Did not meet eligibility or statutory requirements: Program participant does not meet eligibility requirements of program or does not meet requirements of statute. For example, a participant seeks shelter services but cannot be considered to be a victim of domestic or sexual violence. While your program may provide shelter services, a participant who is not a victim of domestic or sexual violence cannot be tracked in the CDVSA database.

Program rules not acceptable to victim/survivor: Although eligible for services under the grant, a victim/survivor is not willing to comply with rules of the program. For example, a program requires eight individual counseling sessions and the victim/survivor does not want to attend individual counseling.

Services not appropriate for program participant: For any reason, the services available under the grant are not appropriate for a program participant. For example, although support groups are offered under the grant for survivors of sexual assault, a program participant requesting support group services is not served because it is clinically determined that the program participant is not appropriate for the group.

Transportation problems: Program participant is unable to arrange for transportation to receive services. This includes situations in which public transportation is available but cannot be arranged due to the associated costs.

Conflict of interest: The program cannot serve the individual in question because current or previous relationships with the individual would interfere with the ability of the program to serve another individual who is currently actively participating in the program. For example, your program is currently serving a program participant. Her partner, identifying as your client's victim, requests to join the same support group as the person you are already serving. This would not be possible.

Services inappropriate or inadequate for people with substance abuse problems: Staff are not able, for any reason, to provide appropriate or adequate services for program participants with substance abuse problems.

Services inappropriate or inadequate for people with mental health problems: Staff are not able, for any reason, to provide appropriate or adequate services for program participants with mental health problems.

Inadequate language capacity (including signing): Interpreter services not available or not available at the time the program participant is seeking services. Program participant may be placed on a waiting list to receive interpreter services, but has not been served by the end of the current reporting period.

Insufficient/lack of culturally appropriate services: Services currently provided under the grant are not culturally appropriate for the program participant.

Insufficient/lack of services for people with disabilities: The services provided under the grant are not accessible to people with disabilities. For example, a participant may seek services from your program with a physical disability which hinders their utilization of services. While every accommodation should be made to provide services, if certain aspects of the services you provide are not met due to a participant's disability, this should be recorded as such.

Geographic or other isolation of victim/survivor: Staff or volunteers cannot serve the victim due to geographic distance or isolation.

Hours of operation: Hours during which the program provides services are not consistent with the hours the program participant is available to receive needed services.

Defining and Tracking Partial Service and Referrals: Referrals

Drug Abuse Treatment: Providing information about residential or non-residential treatment options, resources, meetings, and groups.

Alcohol Abuse Treatment: Providing information about residential or non-residential treatment options, resources, meetings, and groups.

Medical Intervention: Providing information about any type of treatment other than drug or alcohol treatment.

Law Enforcement: Providing option of contacting troopers, VPSO or city police for assistance in reporting a crime, escorting participant when retrieving possessions, etc.

Batterers' Intervention: Providing information about batterers' accountability groups.

A Few Important Notes about Referrals:

Referrals should be tracked on a monthly basis: Like the other categories on the services provided sheet, referrals should be tracked on a monthly basis. However, to insure anonymity this information **should not** be linked in any way to the program participant or program participant ID number.

Within each subcategory, referrals should be tracked on a per-person basis:

- *Example 1:* In July you refer one program participant to Drug Treatment and also to Alcohol Treatment. Your program should track one referral under Drug Treatment Referral and one referral under Alcohol Treatment Referral for the month of July.
- *Example 2:* In July you refer one program participant to Drug Treatment three times. Your program should mark one referral under Drug Treatment Referral for the month of July.

Referrals made to services outside your community should still be counted as referrals: For example, if you are from a rural program and you give a program participant information about a residential treatment facility in Anchorage, this counts as a referral.

Tracking Anonymous Calls & CDVSA Hotline Log (OLD)

ALASKA COUNCIL ON DOMESTIC VIOLENCE AND SEXUAL ASSAULT HOTLINE LOG

Month/Year: _____ Employee: _____

+ Select only one of the options

	Day of Phone Call																Total
Approximate Age (Required)	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F
+ Gender - Female/Male/Other (Required)	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M
Primary Victim/Secondary Victim/ Other	PV	PV	PV	PV	PV	PV	PV	PV	PV	PV	PV	PV	PV	PV	PV	PV	PV
+ Type of Participant (Required)	SV	SV	SV	SV	SV	SV	SV	SV	SV	SV	SV	SV	SV	SV	SV	SV	SV
Primary Issue - DV/SA/Stalking/Other	O	O	O	O	O	O	O	O	O	O	O	O	O	O	O	O	O
+ (Required)	DV	SA	SA	SA	SA	SA	SA	SA	SA	SA	SA	SA	SA	SA	SA	SA	SA
Call Type - Crisis Phone Call/	Crisis	Crisis	Crisis	Crisis	Crisis	Crisis	Crisis	Crisis	Crisis	Crisis	Crisis	Crisis	Crisis	Crisis	Crisis	Crisis	Crisis
+ Info & Referral Call (Required)	I&R	I&R	I&R	I&R	I&R	I&R	I&R	I&R	I&R	I&R	I&R	I&R	I&R	I&R	I&R	I&R	I&R
Safety/Lethality Check																	
Medical Advocacy																	
Personal Support																	
Public/Tribal Assistance																	
Employment																	
Housing																	
Food																	
Child Support																	
VCCB Claims																	
Child Protective Services																	
Adult Protective Services																	
Transportation - Emergency																	
Drug Abuse Treatment Referral																	
Alcohol Abuse Treatment Referral																	
Emergency Medical Intervention Referral																	
Law Enforcement Referral																	
Batterers Intervention Referral																	
Drug Abuse Treatment																	
Alcohol Abuse Treatment																	
Emergency Medical Intervention																	
Law Enforcement																	
Batterers' Intervention																	
Reasons Partially Served (Codes on Back)																	Reverse

Revised 10/01/2007

Total	Reasons Partially Served Codes
	A - Program reached capacity: Program is operating at full capacity. Victims/survivors may be placed on a waiting list.
	B - Need not documented: Determination is made that there is not sufficient basis to provide the services requested by the victim/survivor. For example, a victim/survivor requests shelter even though she has had not contact or threats from her batterer for more than two years and she is not in danger. Therefore, the need for shelter is not documented, even though she is a victim/survivor.
	C - Did not meet eligibility or statutory requirements: Victim/survivor does not meet eligibility requirements of program or does not meet requirements of statute. For example, a victim/survivor requests help with a divorce, but has not met statutory residency requirements to file for a divorce in the jurisdiction.
	D - Program rules not acceptable to victim/survivor: Although eligible for services under the grant, a victim/survivor is not willing to comply with rules of the program. For example, a program requires eight individual counseling sessions and the victim/survivor does not want to attend individual counseling.
	E - Services not appropriate for victim/survivor: For any reason, the services available under the grant are not appropriate for a victim/survivor. For example, although support groups are offered under the grant for survivors of sexual assault, a victim/survivor requesting support group services is not served because it is clinically determined that the victim/survivor is not appropriate for the group.
	F - Transportation problems: Victim/survivor is unable to arrange for transportation to receive services. This includes situations in which public transportation is available but cannot be paid for.
	G - Conflict of interest: The program cannot serve the victim/survivor because current or previous relationships with that victim/survivor or other parties related to that victim/survivor would interfere with the ability of the program to serve that victim/survivor. For example, the program is currently serving a victim/survivor. Her partner, identifying as your client's victim, requests to join the same support group as the person you are already serving.
	H - Services inappropriate or inadequate for people with substance abuse problems: Staff are not able, for any reason, to provide appropriate or adequate services for victims/survivors with substance abuse problems.
	I - Services inappropriate or inadequate for people with mental health problems: Staff are not able, for any reason, to provide appropriate or adequate services for victims/survivors with mental health problems.
	J - Services not available for victims/survivors accompanied by male adolescent: Although shelter services are provided under the grant, your shelter has rules prohibiting adolescent males from residing in the shelter, and the victim/survivor refuses to go to the shelter without the child. Therefore, the victim/survivor is denied shelter services.
	K - Inadequate language capacity (including signing): Interpreter services not available or not available at the time the victim/survivor is seeking services. Victims/survivors may be placed on a waiting list to receive interpreter services, but have not been served by the end of the current reporting period.
	L - Insufficient/lack of culturally appropriate services: Services currently provided under the grant are not culturally appropriate for the victim/survivor.
	M - Insufficient/lack of services for people with disabilities: The services provided under the grant are not accessible to people with disabilities. For example, a shelter does not allow a care attendant to accompany a victim/survivor to the shelter, which prevents her from being able to use shelter services.
	N - Geographic or other isolation of victim/survivor: Staff or volunteers cannot serve the victim due to geographic distance or isolation.
	O - Hours of operation: Hours during which the program provides services are not consistent with the hours the victim/survivor is available to receive needed services.

Purpose:

CDVSA recognizes that a lot more happens during a hotline call than a safety/lethality check. The CDVSA Hotline Log provides a way of documenting the varied services provided and referrals made to callers who choose to remain anonymous.

When does a hotline caller receive a program participant / incident information sheet?

An anonymous caller can become a Program Participant and receive a Program Participant or Incident Information Form under any of the following circumstances:

- If the caller identifies herself;
- If the caller comes to the program in person;
- If the caller establishes a routine time to call and speak with an advocate;
- If a caller provides significant information about perpetrator name and incident information and indicates that s/he will call again

.....

Recommendation: Due to the way that participants and services are tracked in the CDVSA database, coupled with federal reporting requirements, participants that are ONLY recorded as an Anonymous Hotline Caller are not counted within the CDVSA database. Therefore, it is important victim service staff attempt to gather enough information to create a Participant Information and Incident Information Form.

What information is required?

The shaded information at the top of the log is required information for every call.

Why must hotline calls be counted as Crisis Calls or Information and Referral Calls, but not both?

Federal reporting guidelines require that the number of Crisis Calls be reported separately from any other service or type of advocacy.

.....

Recommendation: We all know that a hotline call is rarely just about crisis intervention. More often than not, an advocate will make some sort of referral for additional service before hanging up. Therefore, we recommend classifying calls in which both crisis intervention and information and referral occur as crisis calls. Advocates can then track additional types of service provided.

.....

How do we classify calls from other service providers on behalf of a program participant?

If other service providers contact your program with or on behalf of a program participant, the call may be classified as either a Crisis Phone Call or, more commonly, an Info and Referral Phone Call. If the service provider is calling on behalf of an anonymous person, use the hotline log.

- *Example of a crisis phone call from another service provider:* A state trooper calls a program on behalf of a person who will be flying in to undergo a forensic exam.
- *Example of an info and referral phone call from another service provider:* A counselor from the local drug and alcohol program calls your program and asks about which support groups might be most appropriate for a participant.

What if several people are potentially answering the phone at the same time?

One of the benefits of the **CDVSA Hotline Log** is that each program staff member can have a copy of the log sheet at her desk or workspace. This allows multiple people to provide services to anonymous callers, document the services that s/he provides, and turn the sheet in to the data entry person.

How do I track reasons partially served?

If a hotline caller requests services that you are funded to provide but that you are unable to provide, the caller is partially served.

Total	Reasons Partially Served Codes
	A - <i>Program reached capacity:</i> Program is operating at full capacity. Victims/survivors may be placed on a waiting list.
	B - <i>Need not documented:</i> Determination is made that there is not sufficient basis to provide the services requested by the victim/survivor. For example, a victim/survivor requests shelter even though she has had not contact or threats from her batterer for more than two years and she is not in danger. Therefore, the need for shelter is not documented, even though she is a victim/survivor.
	C - <i>Did not meet eligibility or statutory requirements:</i> Victim/survivor does not meet eligibility requirements of program or does not meet requirements of statute. For example, a victim/survivor requests help with a divorce, but has not met statutory residency requirements to file for a divorce in the jurisdiction.
	D - <i>Program rules not acceptable to victim/survivor:</i> Although eligible for services under the grant, a victim/survivor is not willing to comply with rules of the program. For example, a program requires eight individual counseling sessions and the victim/survivor does not want to attend individual counseling.
	E - <i>Services not appropriate for victim/survivor:</i> For any reason, the services available under the grant are not appropriate for a victim/survivor. For example, although support groups are offered under the grant for survivors of sexual assault, a victim/survivor requesting support group services is not served because it is clinically determined that the victim/survivor is not appropriate for the group.
	F - <i>Transportation problems:</i> Victim/survivor is unable to arrange for transportation to receive services. This includes situations in which public transportation is available but cannot be paid for.
	G - <i>Conflict of interest:</i> The program cannot serve the victim/survivor because current or previous relationships with that victim/survivor or other parties related to that victim/survivor would interfere with the ability of the program to serve that victim/survivor. For example, the program is currently serving a victim/survivor. Her partner, identifying as your client's victim, requests to join the same support group as the person you are already serving.
	H - <i>Services inappropriate or inadequate for people with substance abuse problems:</i> Staff are not able, for any reason, to provide appropriate or adequate services for victims/survivors with substance abuse problems.
	I - <i>Services inappropriate or inadequate for people with mental health problems:</i> Staff are not able, for any reason, to provide appropriate or adequate services for victims/survivors with mental health problems.
	J - <i>Services not available for victims/survivors accompanied by male adolescent:</i> Although shelter services are provided under the grant, your shelter has rules prohibiting adolescent males from residing in the shelter, and the victim/survivor refuses to go to the shelter without the child. Therefore, the victim/survivor is denied shelter services.
	K - <i>Inadequate language capacity (including signing):</i> Interpreter services not available or not available at the time the victim/survivor is seeking services. Victims/survivors may be placed on a waiting list to receive interpreter services, but have not been served by the end of the current reporting period.
	L - <i>Insufficient/lack of culturally appropriate services:</i> Services currently provided under the grant are not culturally appropriate for the victim/survivor.
	M - <i>Insufficient/lack of services for people with disabilities:</i> The services provided under the grant are not accessible to people with disabilities. For example, a shelter does not allow a care attendant to accompany a victim/survivor to the shelter, which prevents her from being able to use shelter services.
	N - <i>Geographic or other isolation of victim/survivor:</i> Staff or volunteers cannot serve the victim due to geographic distance or isolation.
	O - <i>Hours of operation:</i> Hours during which the program provides services are not consistent with the hours the victim/survivor is available to receive needed services.

Use the "Reasons Partially Served" alphabetical code on the reverse of the Hotline Log to record the reason(s) the caller was partially served. You may mark as many reasons as apply.

Count the totals from the front side of the hotline log and tally them in the space provided to the left of each “Reason Partially Served” category.

How do programs report this information to CDVSA?

The **CDVSA Hotline Log** does not have a counterpart in the database. Your program should tally the total number crisis calls and of information and referral calls within each reporting period, as well as the services provided during the course of these calls. These numbers should be provided to CDVSA.

Protective Order Report

**ALASKA COUNCIL ON DOMESTIC VIOLENCE AND SEXUAL ASSAULT
PROGRAM PARTICIPANT PROTECTIVE ORDER REPORT**

Date of report / /
MM / YY

PROGRAM PARTICIPANT ID _____	
Was perpetrator arrested? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Did court grant a "no contact" order? <input type="checkbox"/> Yes <input type="checkbox"/> No

TYPE OF PROTECTIVE ORDER REQUESTED:
<input type="checkbox"/> Domestic Violence <input type="checkbox"/> Sexual Assault <input type="checkbox"/> Stalking <input type="checkbox"/> Tribal (see below*)

72-HOUR EMERGENCY ORDER	<i>Date Requested</i>	<i>Outcome</i>
	<u> </u> / <u> </u> / <u> </u> MM / DD / YY	<input type="checkbox"/> Granted <input type="checkbox"/> Denied <input type="checkbox"/> Unknown

EX-PARTE ORDER	<i>Date Requested</i>	<i>Outcome</i>
	<u> </u> / <u> </u> / <u> </u> MM / DD / YY	<input type="checkbox"/> Granted <input type="checkbox"/> Denied <input type="checkbox"/> Unknown

LONG-TERM ORDER	<i>Date Requested</i>	<i>Outcome</i>
	<u> </u> / <u> </u> / <u> </u> MM / DD / YY	<input type="checkbox"/> Granted <input type="checkbox"/> Denied <input type="checkbox"/> Unknown

* Tribal orders may differ significantly from State orders. Please complete the information requested to the best of your ability for Tribal orders (you may need to enter the Tribal as a Long-Term Order).

Revised 10/1/2007

Protective Order Report Form: Introduction & Instructions

Purpose:

Use this sheet to track the status of protective orders requested by a program participant.

Box One:

- Indicate Program Participant ID #
- Mark whether or not the perpetrator was arrested.
- Mark whether or not the court issued a “no contact” order.

Box Two:

- Mark the type of order requested. Alaska has **four** types of Protective Orders:
- Domestic Violence
- Sexual Assault
- Stalking
- Tribal Protective Order

Note: Tribal orders differ significantly from State orders. Please complete the information requested to the best of your ability for Tribal orders. You may need to enter the Tribal Order as a Long-term Order.

Boxes, Three, Four and Five:

For each of the following types of orders:

- 72-hour Emergency Order;
- Ex-parte Order; and
- Long-term Order
- Date Requested: Indicate the date that each type of order was requested.
- Outcome: Mark whether the order was:
 - Granted;
 - Denied; or
 - Unknown

Important: If a program participant does not appear for a hearing and the protective order request is dismissed because of this, mark “Unknown”. Do not mark “Denied,” because the court did not deny the order.

Working with the CDVSA Database

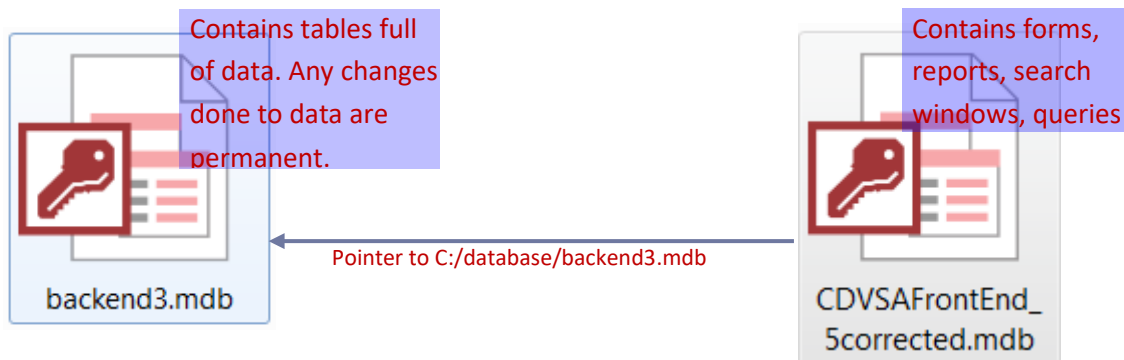
Physical Security

The CDVSA database is located on a data computer that should not be connected to the internet. This is because the CDVSA Research Analyst does not have the background and skills to protect the data computer from all possible viruses and hacking scenarios.

The data computer's login should be protected by a strong password (Not a password that is written anywhere in sight or in the same room as the computer, and not a password that can be guessed, such as phone, address, name of program, etc). The computer should be physically secure, so that the public can not access it. It should not be possible for a bad actor to walk into the building, and walk out with the computer tower/laptop.

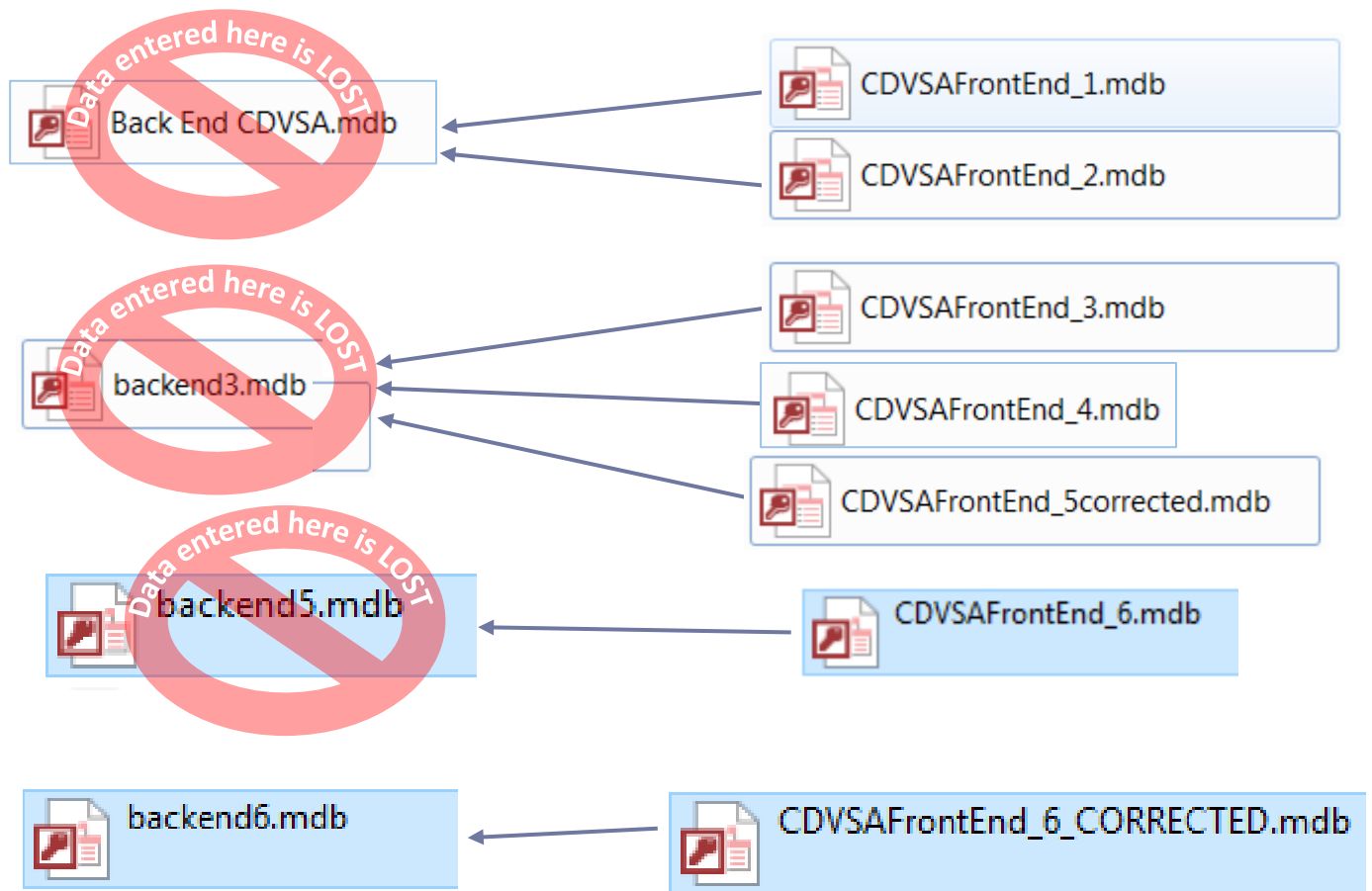
Structure of CDVSA database

The CDVSA database is a split database. That means that it is divided into two files. The backend is for storing tables of data, and the front end is used for entering data and extracting it:



The front end is linked to the back end, which means that any information that is entered in the front end gets stored in the back end. The back end must always be located in the C:\database\ folder in your data computer, since that is where the front end points to. The front end can be located on the desktop. There is only one back end at a time that has the latest data in it, and all new data should go there. If data is put into the wrong back end, it can be lost.

Data can be put in the wrong back end if the data is entered in an old front end. For example, this is the structure of some recent versions of the database:



If data is entered into a front end older than FrontEnd_6_CORRECTED (like FrontEnd_6 or 5 or 4), the data will go into an older back end, **and it will be lost.**

Only using the latest front end will prevent data from being entered in the wrong back end. The name of the latest front end will be posted on this website <https://dps.alaska.gov/CDVSA/Grantee-Support/Database-Support>, and you are also always welcome to call or email the CDVSA's research analyst, at: (907) 465-4673.

Regular backups using your secure flash drive

There is only one active backend file at any given time. **If that file is lost and wasn't backed up, the data in the database will be lost.**

In order to prevent massive data loss, regular backups need to be completed. Any time a significant amount of time is spent entering data into the database, the back end should be backed up. **At the minimum, regular backups should happen quarterly.**

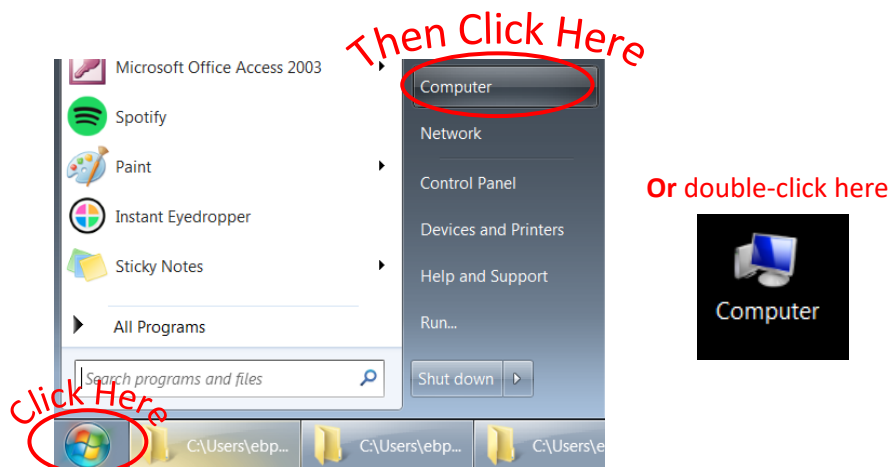
This process of creating a secure backup is easy. It only requires having a secure flash drive and a few minutes. This is what your secure flash drive should look like:



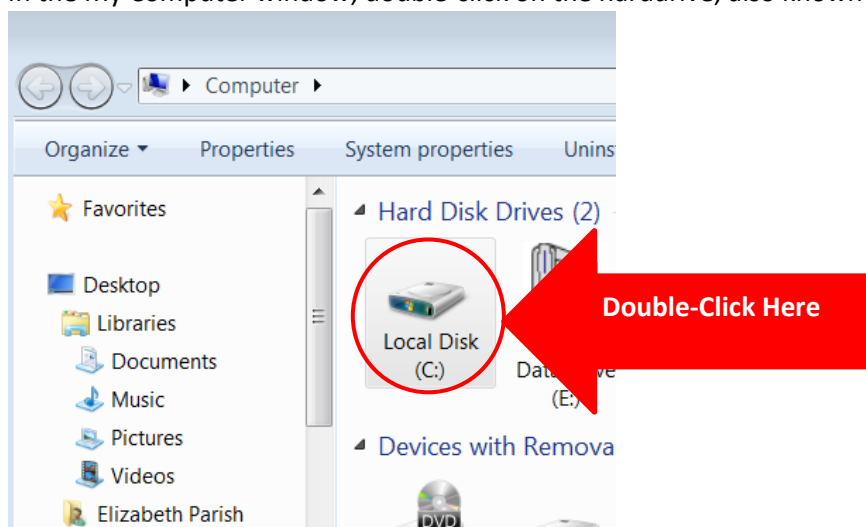
If you can't find a secure flashdrive, contact the CDVSA research analyst, and we may be able to get you another one, or instruct your program on where to buy it. If you can't remember the password, you may need to reformat the drive and set up a new password. See the instructions in the appendix (Page x) for how to reset and reformat your secure flash drive.

Steps for creating a secure backup:

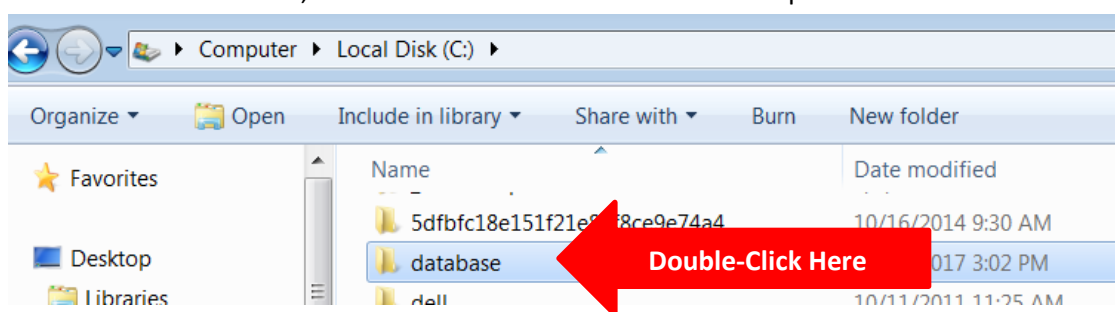
- 1) Navigate to your database folder
 - a) Click on your Computer or My computer icon, which is on your desktop or in your start menu



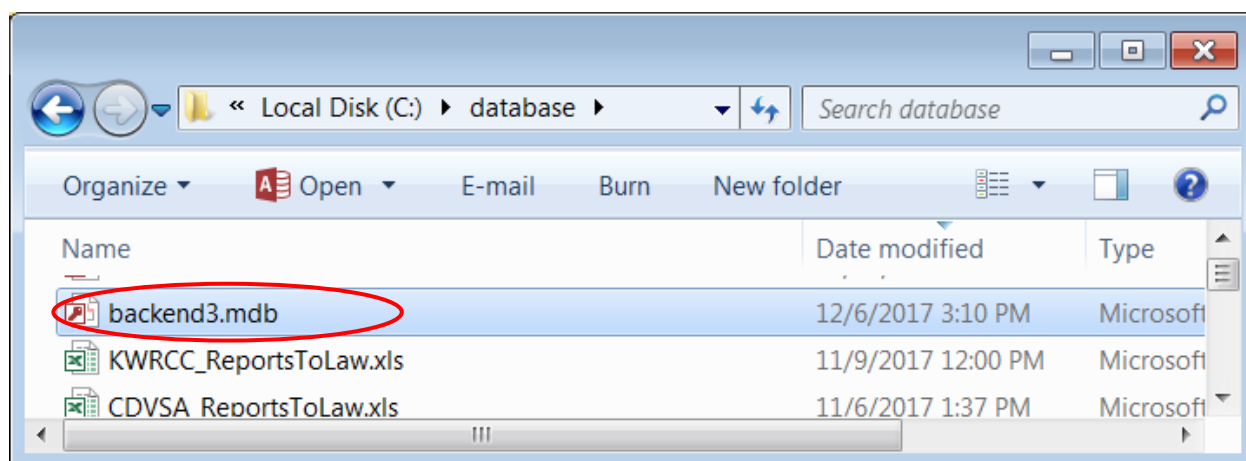
- b) In the My Computer window, double-click on the harddrive, also known as **(C:)** or the Local Disk



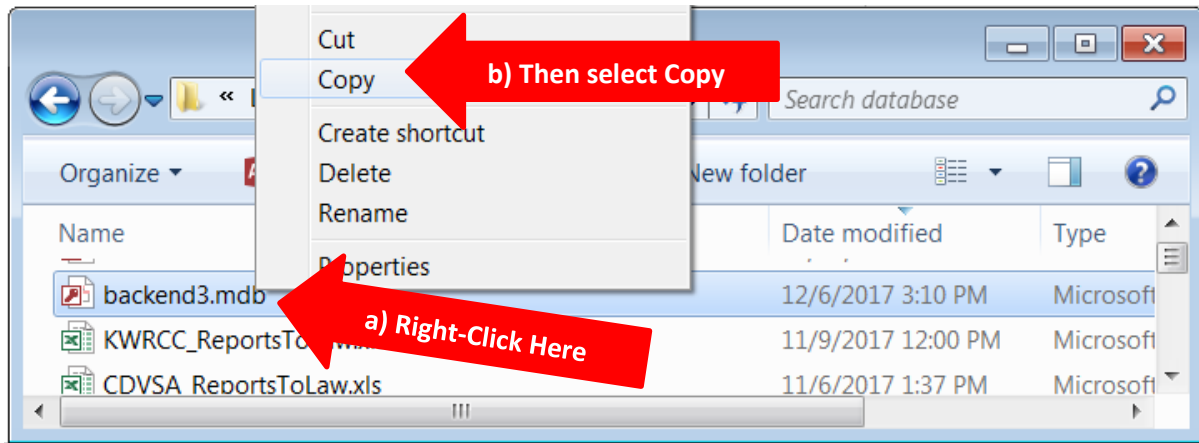
- c) In the harddrive window, double click on the database folder to open it.



- 2) Find the *current* back end file. If you are not sure which file is the current file, feel free to call the CDVSA Research Analyst at 907 465-467. It may look like this, or it may have a later number:



Copy this file (VERY important, DON'T CUT the file or move it) by right clicking on it and selecting **Copy** from the menu that appears.

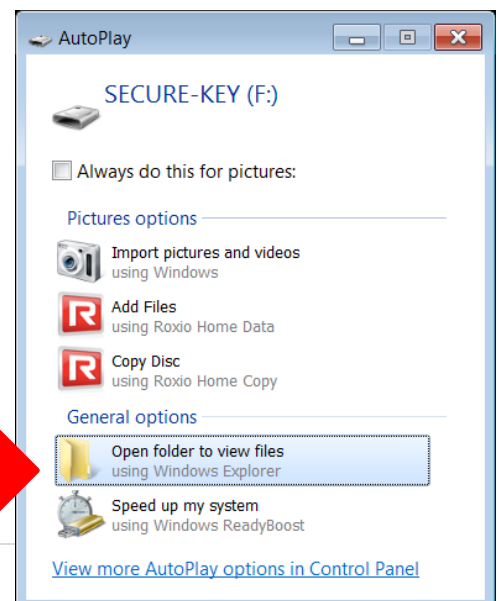


- 3) Close all the open windows by clicking all the X's in the upper right hand corner of each window.

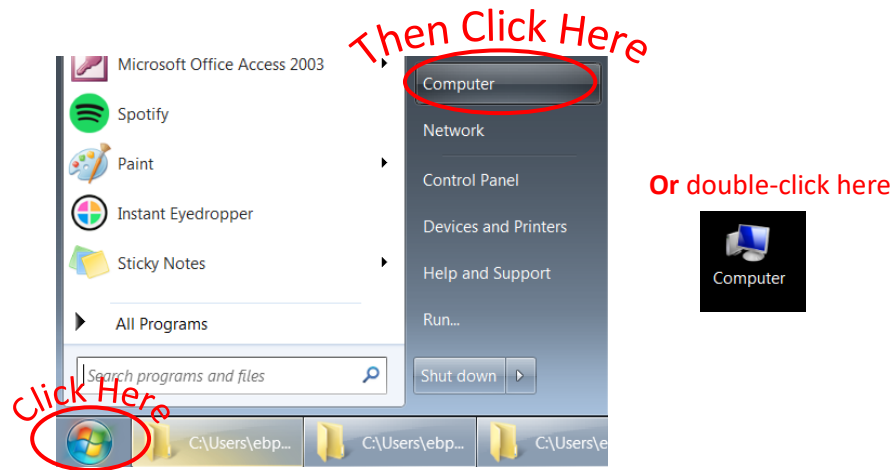


- 4) Unlock your secure flashdrive
 - a) Hit the button that has a key on it
 - b) Without much delay, enter your password
 - c) Hit the key button again. When the flashdrive is unlocked, it should be slowly blinking green.
 - d) While the green light is still blinking, put it into a USB port on your data computer.

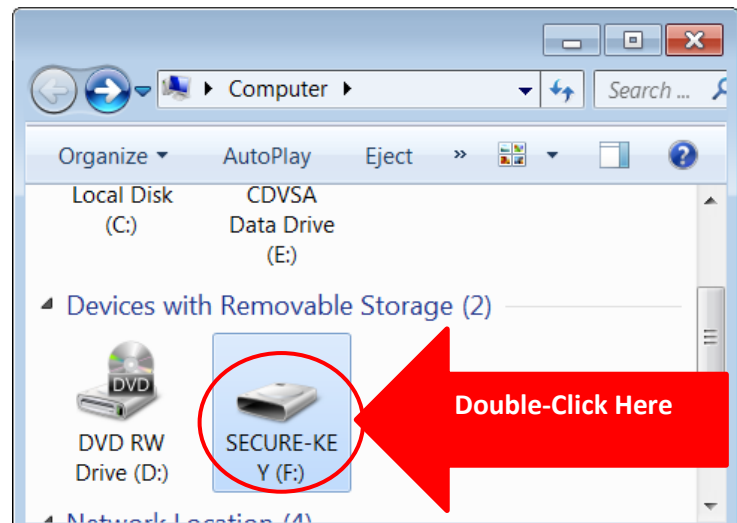
- 5) Navigate to your flash drive window.
 - a) If a window has appeared asking if you want to open the file, then select open.



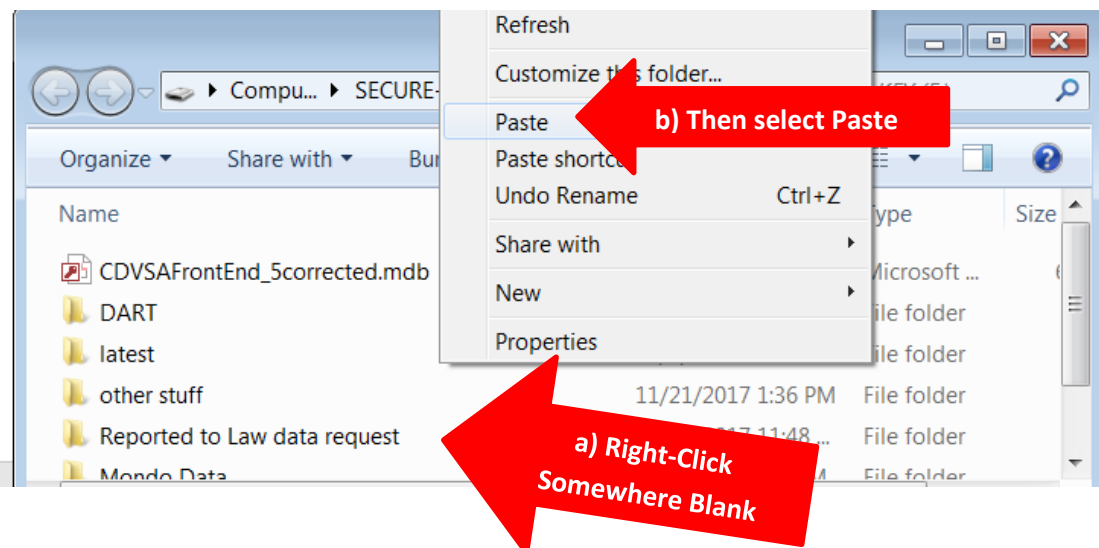
- b) If not, then to get to the flash drive window, go to My Computer:



- c) The My Computer window should appear like this, and the place we're looking for should be called secure key or removable disk, or something similar. Double click on it in order to open the flash drive window.

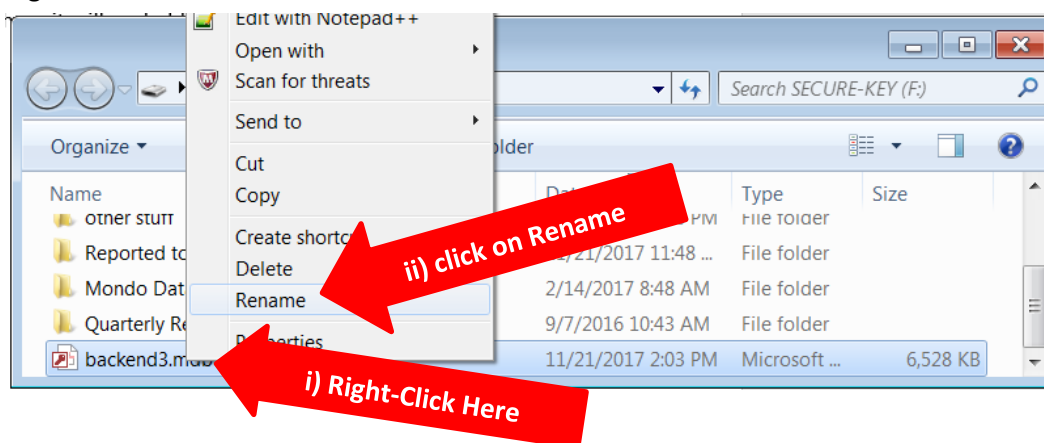


- 6) The flash drive window should appear. Paste in the backend by right-clicking on a blank area in the flash drive window, and selecting Paste from the menu that appears

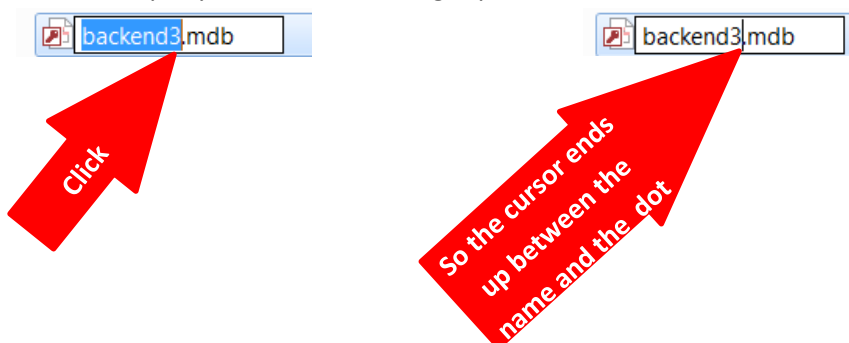


7) Your copy of the backend should appear in your flash drive window. Rename the backend by adding the date to it:

a) Right click on the backend and select rename



b) The text “backend3” should be highlighted. Click between the text of the name and the “.mdb” in order to put your cursor in the right place



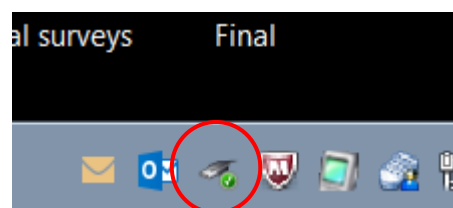
c) Type the date (format doesn't matter, except no slashes are allowed), and then hit the “Enter” button on your keyboard.



8) Close all the open windows on your computer.

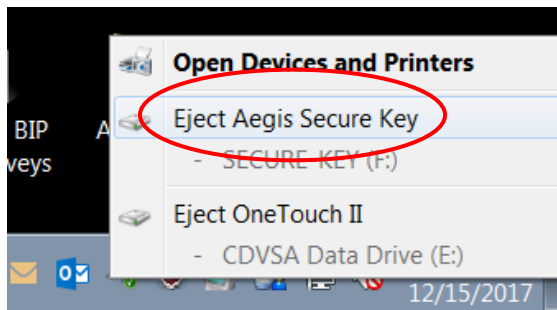
9) Safely remove your flash drive.

a) To do this, you will want to select the Safely Remove Hardware and Eject Media icon, on the bottom right of your screen.

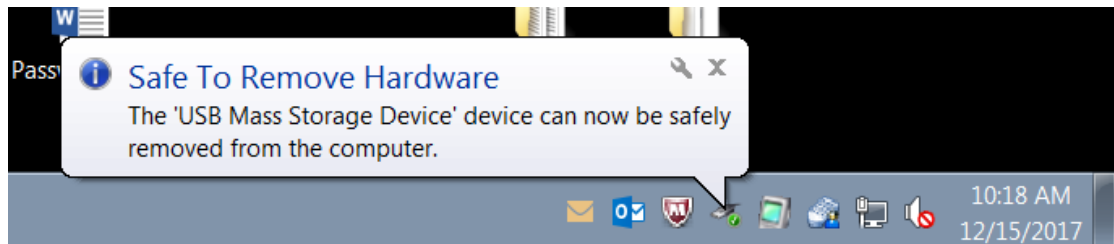


b) That icon may be hidden behind other icons on the taskbar. In this case, you might have to hover over or click on a few other icons, in order to find the Safely Remove one.

- c) Then you will select the secure key from the menu that appears.



- d) When the computer says “Now safe to remove hardware” or some similar message, then take out the flash drive.



- 10) Bring the flash drive to a location that is separate from the data computer, and where it will probably not be lost or forgotten
- 11) You are done!!!

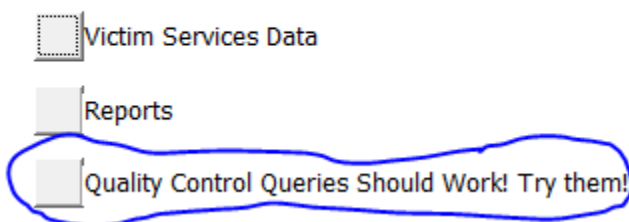
Quality Control Queries

There are currently three queries in the database that can help you identify data gaps or quality problems. These are the quality control queries, and they are accessible from the main menu.

I recommend everyone get to know these queries and try using them. If

you have an idea for additional queries that would be useful, possibly for example about incident information, please pass on your idea to the current Research Analyst.

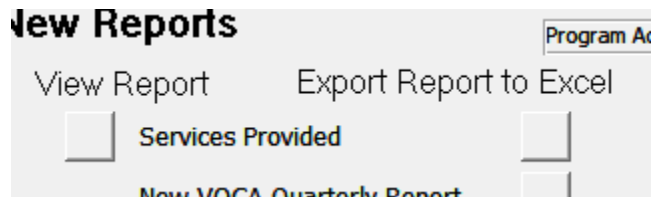
CDVSA Database Front End



Services Provided Report

A report that every database user should know is the services provided report. This is the first report on the main reporting menu:

New Reports



Program A

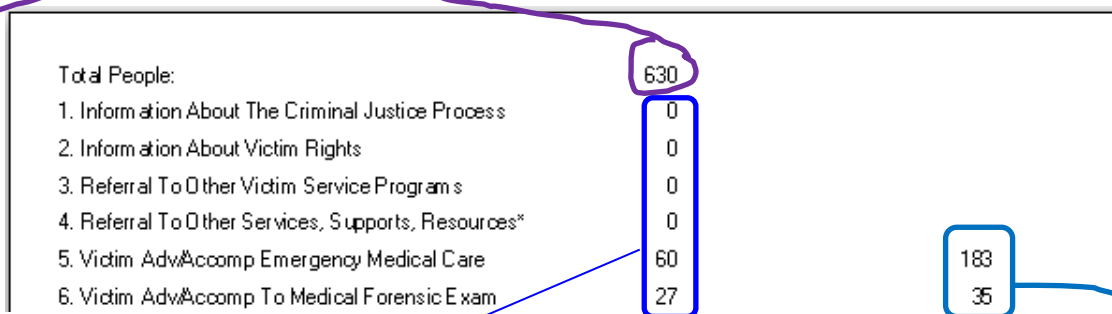
View Report Export Report to Excel

☒ Services Provided ☐

New VOCA Quarterly Report ☐

To view this report, first enter a time period in the Report Menu, and then click the View Report button next to the Services Provided text.

A menu will appear that allows you to select by age, race and gender. You may leave all options selected to get a report that includes everyone, or you may restrict by one or more of these categories. Click the View Report button at the bottom of this menu to view the report.



Total People:	630
1. Information About The Criminal Justice Process	0
2. Information About Victim Rights	0
3. Referral To Other Victim Service Programs	0
4. Referral To Other Services, Supports, Resources*	0
5. Victim Adv/Accomp Emergency Medical Care	60
6. Victim Adv/Accomp To Medical Forensic Exam	27

183
35

The left column of numbers in this report is a count of the number of people (in the selected categories) who got the associated service during the specified time period.

The number at the top of the left column is the total number of people in the selected categories who got any services at all during the specified time period.

The right column of numbers is the total number of each service provided (during the specified time period) to all participants who are part of the selected categories.

For example, in this case, 630 participants who belong to the selected categories got services during the time period. 60 people total got service #5, and they received that service 183 times.

Other Reports:

It would be useful to know the definitions for the other reports in the database, so that you can verify that the data is correct, and so that you can use the data in the reports.

Demographic data in FVPSA and VOCA reports are counted in a unusual way, time-wise. VOCA demographic data is for people who got services during that quarter, who didn't get services in any previous quarter during that federal fiscal year (which begins October 1), although they may have gotten services from your program before the beginning of the fiscal year. FVPSA demographic data is for all people who got services that year, excluding those who also got services at any time before the federal fiscal year began.

Below are definitions for the subreports of the Yearly report, that are accessible for your use:

(The BetterLU query connects incidents and services according to the connections that have been set on the services tab in the database. Any incidents that haven't been connected by hand on the services tab will be connected automatically with the soonest service that follows, and vice versa.)

Yearly_1: The total number of people in each detailed racial category, who got at least one service during the selected time period.

Yearly_2: The sum of all services provided to participants, broken out by participant racial category. Each participant may fit into more than one racial category, so for example if they are black and caucasian, then the services that they were provided will be counted in the white category and in the Other category. The "All" racial category is simply a count of total services provided regardless of race.

Yearly_3: Count of people who got each type of housing service (shelter including overflow, transitional, or either) during the time period, by race. If a person is identified with more than one race, then the services for that person are counted more than once--once for each racial group.

Yearly_4: A count of all participants who got services during each time period, broken out by age in various ways.

Yearly_5: This is a count of incidents associated with people who got services during each time period, where the services are associated via the BetterLU query with at least one incident. If a person had multiple incidents of a single type, the person is only counted once for that incident.

Yearly_6: This is a count of all incidents that are associated via the BetterLU query with at least one service that was provided in the time period.

Yearly_7: This is a count of incidents associated with people who got services during each time period, where the services are associated via the BetterLU query with at least one incident. There is less duplication than in Yearly_5 because each incident only counts in the first state fiscal year that had services associated with it. If a person had multiple incidents of a single type, the person is only counted once for that incident.

Yearly_8: This is a count of all incidents that are associated via the BetterLU query with at least one service that was provided in the time period. There is less duplication than in Yearly_6 because each incident only counts in the first state fiscal year that had services associated with it.

Yearly_9: This is a count of people who got services, during each time period, where the services are associated via the BetterLU query with at least one primary incident. The incidents are broken out into 5 categories, and if a person had multiple incidents in a single category, the person is only counted once in that category. The count of people is then further broken out by gender. Actually, modified this to count people only for the first state fiscal year where services related to each incident.

Yearly_10: This is a count of primary incidents that are associated via the BetterLU query with at least one service that was provided in the time period. The incidents are broken out into the 5 categories, and then also broken out by gender of the victim. Actually, modified this to count incidents only for the first state fiscal year where services related to each incident were provided.

Yearly_11: Total number of shelter nights, of the three main types, by age, gender, and year service was provided.

Yearly_12: Total number of people (counted by Participant ID) who got shelter and who didn't, broken out by age and gender. The totals in the various shelter/not categories should equal each other since it's counting the same number of people.

Yearly_13: All protective orders, restricted and categorized by Report Date. I previously (before bigdata_step15) required that for an outcome to count, it had to have a non-null date associated with each specific outcome. But I removed that requirement.

Yearly_14: A breakout of people who got services during the time period by gender, and by if they had a parent who had gotten services during that year/time period, or not (a breakout of whether or not they were listed as a child of someone else (1 is yes, zero is no)). There are three housing categories, each broken into "got it, or not", and each category adds up to each other one, since each housing category is a breakout of the total people who got services during the period. (gender categories: 1, female; 2, male; 3, other or unknown. With and without parent categories: 1=with parent, 2=without a parent.

Yearly_15: Count of victims, broken out by age categories, and into 5 racial categories, who got at least one service during the time period

Yearly_16: Incidents are categorized into state fiscal year by the date of the earliest service provided for that incident. Each incident is classified into one or more of the 5 primary incident categories, depending on what items are selected (exclusively secondary incidents are ignored). If an incident fits into more than one category, then for this query, the victims's age at the date of the incident will be counted once in each of the categories. The categories are 1, DV. 2, SA. 3, stalking. 4, other violent. 5, other non-violent.

Yearly_17: Incidents are categorized into state fiscal year by the date of the earliest service provided for that incident. Each incident is classified into one or more of the 5 primary incident categories, depending on what items are selected (exclusively secondary incidents are ignored). If an incident fits into more than one category, then for this query, it's perpetrator's age at the date of the incident will be counted once in each of the categories. If there is more than one perpetrator, each one is counted for that incident.

Yearly_18: All participants who got services during the fiscal year, their community of residence, but if that is empty, then their mailing city.

Yearly_19: Incidents are counted by the date of the first service provided for the incident. Incidents are divided into 5 categories, and crosstabbed with the 6 incident location radio-button categories (see frmintake for radio button categories: 1, Anchorage; 2, Fairbanks; 3 is "the town that the program is in" so, for WISH it's Ketchikan, etc.; 4 is a different location within Alaska; 5 is a different location outside of Alaska; and 6 or blank is unknown/undisclosed.) Data entered before 2017 I think, was not categorized in this way, and all the written data was all dumped into the detail field of different location outside of Alaska.

Yearly_20: Total number of unique people who got each service each year, broken out by adult/minor--age when they first got any service that year.

Yearly_21: A breakout of all services by the age that the participant was when they first received any services during the time period. Could have done it by assigning an age to each service, so that the services would be broken out by the age that the participant was when they received that particular service, but the distinction didn't seem that important.

Yearly_22: Count of people, divided into adult and minor, who got services during the time period, and at least one service they received during that period was connected in the BETTERLU table with an incident that had at least once secondary victimization category checked.

Yearly_23: Number of primary incidents that lack information on perpetrators, by incident category. This counts incidents that fall within the time period. As such, very recent data draws will under-count incidents because services may not yet have been sought for some incidents that happened during the recent reporting period. I figured this is ok because we're interested in rates within incidents rather than rates of incidents.

Yearly_24: This one counts, for primary incidents, by incident category, the answer to the question "was the perpetrator under the influence at the time of the incident?" for associated perpetrators. This counts perpetrators for incidents that fall within the time period. As such, very recent data draws will under-count incidents because services may not yet have been sought for some incidents that happened during the recent reporting period. There can be more than one perpetrator per incident.

Yearly_25: This one counts for primary incidents, by incident category, the answer to the question "If yes, which substances?" for associated perpetrators. This counts perpetrators for incidents that fall within the time period. As such, very recent data draws will under-count incidents because services may not yet have been sought for some incidents that happened during the recent reporting period. There can be more than one perpetrator per incident.

Yearly_26: Incidents are categorized into state fiscal year by the date of the earliest service provided for that incident. Each incident is classified into one or more of the 5 primary incident categories, depending on what items are selected (exclusively secondary incidents are ignored). If an incident fits into more than one category, then for this query, the relationship of the perpetrator to the victim, for the incident will be counted once in each of the categories. If there is more than one perpetrator, each one's relationship is counted for that incident. Doesn't account for incidents at all if they don't have at least one associated perpetrator.

Yearly_27: Total services provided during the state fiscal year, for each of 4 categories of incident, whether primary or secondary (other is not broken out into violent and non-violent, it's code is simply "4")

Yearly_28: Counts the race of people associated with each incident, where the incidents are broken out into 4 categories (DV, SA, Stalking, Other), and the races are aggregated. Incidents are only counted when the first service provided for that incident occurred during the state fiscal year.

Yearly_29: Counts race of perpetrators by incident type. Incidents are only counted when the first service provided for that incident occurred during the state fiscal year. Doesn't account for incidents at all if they don't have at least one associated perpetrator.

Yearly_30: For primary incidents of sexual assault, this is a breakout of whether or not the incidents were reported to law enforcement, by whether the participant was an adult or a minor at the time of the incident. Incidents are counted if the first service that was received for that incident occurred during the state fiscal year.

Yearly_31: For primary incidents of sexual assault, this is a breakout of whether or not the incidents were reported to law enforcement, restricted to incidents that have a victim between the ages of 14 and 18 inclusive. Incidents are counted if the first service that was received for that incident occurred during the state fiscal year.

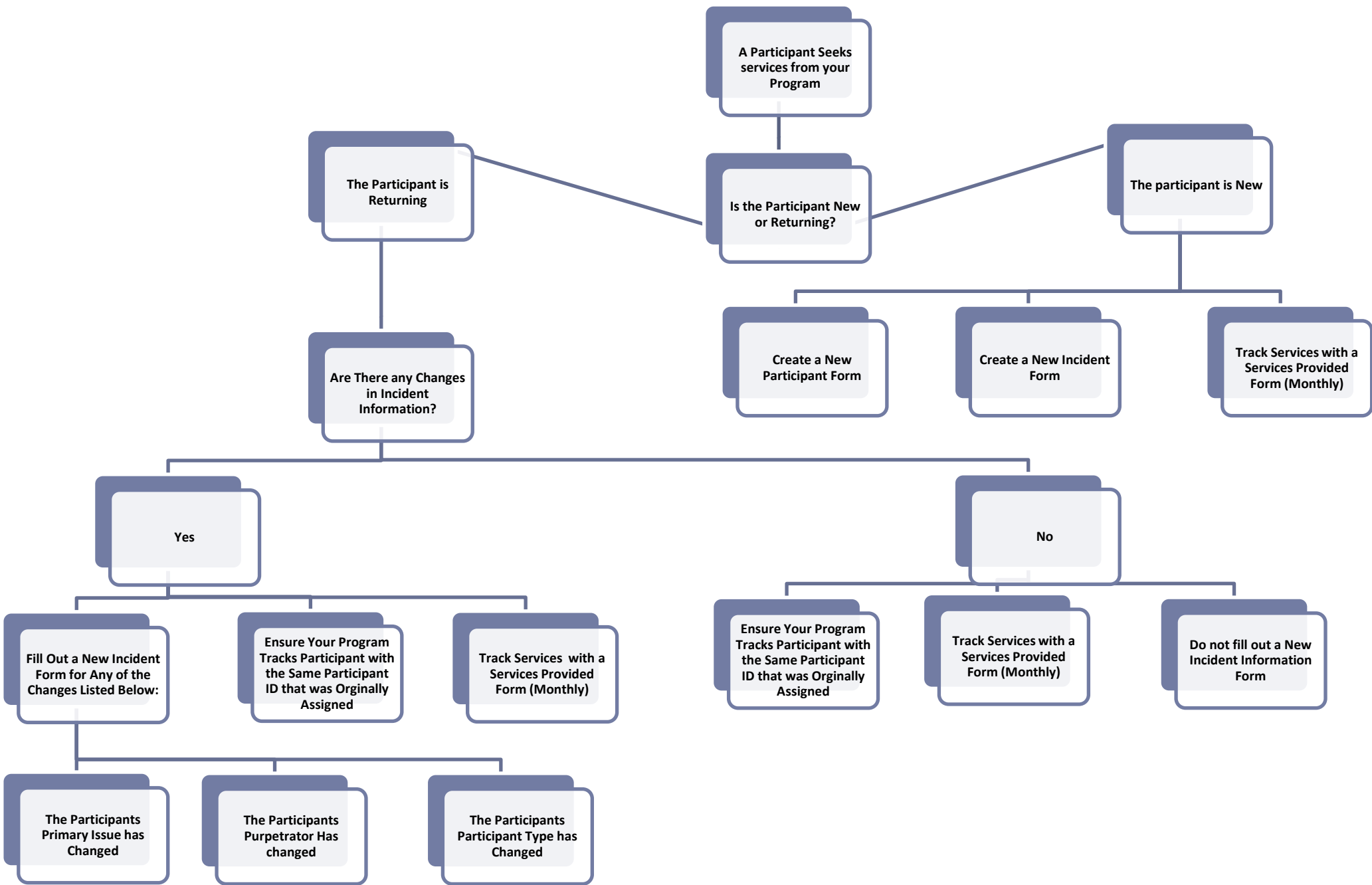
Yearly_32: For primary incidents of sexual assault, for victims who were age 18 and up at the time of the incident, this is a breakout of whether or not the incidents were reported to law enforcement, by gender. Incidents are counted if the first service that was received for that incident occurred during the state fiscal year.

Queries

Feel free to learn about how to make queries in Microsoft Access from online. If you get comfortable with this process, you may find that you can open up the back end of the database (after making a backup) and run your own queries to find out what you would like to know about the data in the database.

If you have neither the time or inclination to learn how to make your own queries, but you would still like data from the database that you can't find in a pre-built report, **please don't hesitate to ask the CDVSA Research Analyst for assistance.** The research analyst may be able to build queries that you can run in your database. If they get asked about this data frequently, they may build a report that will be incorporated into subsequent versions of the database.

Form Relationship Tree (Appendix A)



Appendix B:

Consolidating

Duplicate Records

****warning**** don't attempt this unless you have a strong understanding of how the database and its relationships work, including the difference between Participant ID and Victim ID.

Step 1:

Using a query, and searching for First Names, Last Names, and/or Participant IDs, identify all of the records in **tblParticipants** that represent just one person, and need to be consolidated. Write down the ParticipantIDs and the VictimIDs of each record.

Step 2:

Choose one record to be the final record and circle its Victim ID, which is now the Final Victim ID. This choice might be based on how many services or incidents are connected to that record. All of the other records have Old Victim IDs

Step 3:

Look in **tblIncidents** for any Old Victim IDs (you can sort the table by Victim ID, in order to find them easily). Replace these Old Victim IDs with the Final Victim ID. Repeat this for every data table except for **tblParticipants**:

tblIncidents

tblParentChildParticipantRelationships (if the participant is an adult)

tblParticipantProtectiveOrders

tblParticipantServices

tblReferrals

tblIncidentServicesLU

Step 3A: **Do this only if the the participant is a child:**

Look in **tblParentChildParticipantRelationships**. Look in the Child Participant ID column for any Old Participant IDs. Change them to the Final Participant ID.

Step 4:

Look in all of the tables that you modified in Step 3. Identify any duplicate entries, for example if your person has two identical records in **tblParticipantsServices** for January 2012. You are unlikely to find any duplicate records. But if you find some, delete any duplicate records that your person has in these tables.

Step 5:

Look in **tblParticipants**, at all entries for the individual. Verify that the record with the Final Victim ID has all of the latest demographic information about the individual. Delete all the records that have an Old Victim ID.

Appendix B: Using, Resetting, and Reformatting your Secure Flash Drive

Apricorn Aegis Secure Key

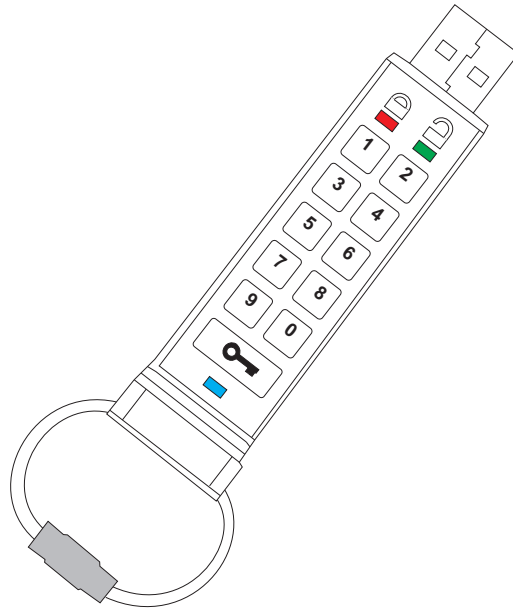


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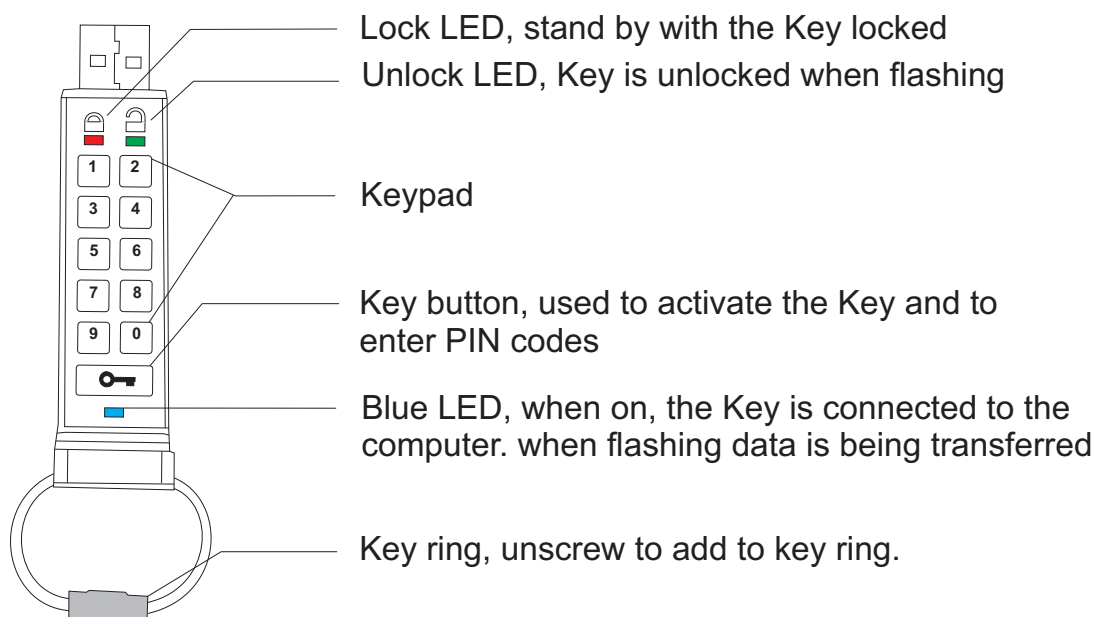
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Apricorn Aegis Secure Key











Introduction

Thank you for purchasing the Apricorn Aegis Secure Key. The Aegis Secure Key works by simply entering your desired 7-15 digit PIN directly onto the onboard keypad. The Aegis Secure Key can then be connected to any USB port on any computer. Should the Key be lost or stolen, you can rest assured that all data held on the Aegis Secure Key is safe and cannot be accessed by any unauthorized third party.

We recommend that you download and print the manual first before making any changes. The manual can also be found at www.apricorn.com, then select Aegis Secure key.











1. LED indicators

	Blinking	Key is unlocked, plug into USB port		On solid	Key connected to USB port
	Blinking	Key is locked		On solid	Key does not have a User PIN
	Blinking	Data is being transferred		On solid	Key connected with host computer
	Blink alternately	Error		On solid	Key accepting new PIN code
	Blink together	Accepting User PIN		Double blink	Accepting Admin PIN

Apricorn Aegis Secure Key

2. Unlocking the Aegis Secure Key

Instructions	LED Activity
1. Press the Key button 	  will blink together
2. Within 10 seconds enter the User PIN (Factory default PIN: 1-1-2-2-3-3-4-4)	
3. Press the Key button 	 will blink for a correct PIN entry  will blink for an incorrect PIN entry
4. Connect the Aegis Secure Key to a USB port within 30 seconds	 will be on  will be on or blink for activity
5. To lock the Aegis Secure Key, Unplug it from the USB port.	

















The Aegis Secure Key is shipped with a default user PIN of 1-1-2-2-3-3-4-4. We recommend that you change the user PIN immediately for security reasons. Follow the directions under the heading “ Changing your PIN code.”

3. Changing your PIN code

A user PIN (Personal Identification Number) can be changed to almost any number that is desired. To create your new PIN be sure to follow the instructions below

1. The new PIN is 7 to 15 digits long.
2. The new PIN can not contain all repeating numbers (3-3-3-3-3-3-3)
3. The new PIN can not have sequential numbers (1-2-3-4-5-6-7) or (7-6-5-4-3-2-1)

Instructions	LED Activity
1. Press the Key button 	  will blink together (Factory default PIN: 1-1-2-2-3-3-4-4)
2. Within 10 seconds enter the User PIN and press the Key button 	
3. Press and hold the Key button  for 3 seconds	  will be on
4. Enter a new PIN number (The number must be 7 - 15 digits)	
5. Press the Key button  to store the new PIN	  will blink together
6. Re-enter the new PIN number	
7. Press the Key button  to confirm the new PIN	 will blink if the new PIN is accepted and the Key is unlocked & ready to use   will blink alternately if the new PIN was not accepted



Note: If a mistake is made when changing the PIN, or the process was not complete, the KEY will retain the original PIN

Apricorn Aegis Secure Key

4. Resetting your Aegis Secure Key

















In case the User PIN has been forgotten, or if you would like to delete all data stored on the key and configure a new user PIN, follow the instructions below. The reset process will clear all PINs and encryption Keys and destroy all data. This means a new User PIN will have to be defined in order to re-enable the Key. Also, since this will force the creation of a new encryption Key, the Aegis Secure Key will have to be reformatted.



Note: By resetting the Aegis Secure Key, all data previously stored on the drive will be lost!

Instructions

LED Activity

1. Press the Key button 	  will blink together
2. Press the Key button 	 will blink
3. Press and hold the Key button and the number 2 button for 3 seconds  	  will blink together
4. Enter 9 - 9 - 9 and press the Key Button    	LEDs will turn off
5. Press the Key button 	 will be on solid
Note: When the  is on and solid, a new user PIN will need to be set prior to use.	

5. Setup new PIN after resetting Aegis Secure Key













Once the Key is reset either by the method above or if the Key was locked by a brute force attack (10 unsuccessful attempts to unlock the Aegis Secure Key). A new user PIN will need to be defined.

A user PIN (Personal Identification Number) can be changed to almost any number that is desired. In order to make the Aegis Secure Key a more secure product you need to create a PIN that follows the instructions below

1. The new PIN is 7 to 15 digits long.
2. The new PIN can not contain all repeating numbers (3-3-3-3-3-3-3)
3. The new PIN can not have sequential numbers (1-2-3-4-5-6-7) or (7-6-5-4-3-2-1)

Instructions

LED Activity

1. Press the Key button for 3 seconds 	  will be on
2. Within 10 seconds enter the new PIN See the note above about acceptable PIN's	  will be on
3. Press the Key button to save 	  will blink together if accepted
4. Re-enter the new PIN number & press the Key button 	 will blink if the new PIN is accepted and the Key is unlocked & ready to use
5. If the new PIN was accepted, the Green LED will be flashing. The key will be unlocked and be ready to format.	  will blink alternately if the new PIN was not accepted

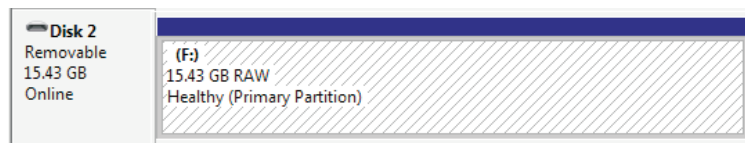
Apricorn Aegis Secure Key

6. Setup the Aegis Secure Key with Windows after a complete reset

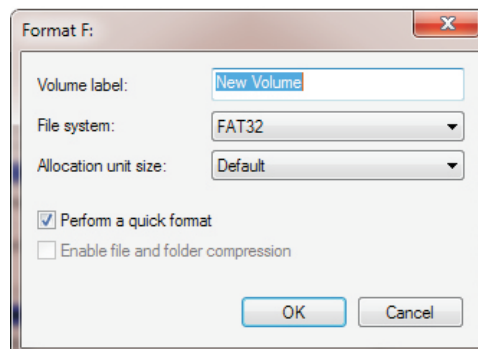
A complete reset of the Aegis Secure Key will erase all information and partition settings. You will need to initialize and format the Aegis Secure Key.

To initialize your Aegis Secure Key, do the following:

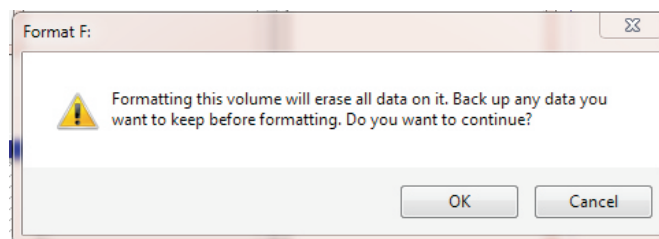
1. Setup and new PIN (see Page 4)
2. Unlock the Aegis Secure Key and attach to the computer.
3. Wait until the Blue LED turns on
4. Right-click My Computer, and then click Manage from the Windows desktop.
5. In the Computer Manage window, click Disk Management. In the Disk Management window, the Aegis Secure Key is recognized as a removable device in raw format
6. Do the following to make the Key recognized as a basic drive.
 - Right-click Removable Raw drive, in the blank area under the Unallocated section, and then select Format.



7. The Format window opens.



8. Select FAT32 of NFTS depending on your needs and click OK



9. Click OK on the Format warning window and click OK.
10. While the Aegis Secure Key is formatting the Blue LED will be flashing.
11. When finished the Blue LED will be on solid and your Aegis Secure Key is ready for use.

Apricorn Aegis Secure Key

7. Creating an Admin PIN

The ADMIN PIN is useful in a corporate environment where an Administrator will provide access to the Key if the User PIN is forgotten or unavailable. Individuals are strongly discouraged from using this feature as it can be cumbersome to setup and improper use can provide unintended results.





















The Aegis Secure Key can be setup with an Admin PIN. If the Admin PIN is used to access the Key the User PIN will be **erased**, and a new USER PIN will need to be created. The User data will not be erased, only the User PIN

The Admin PIN can be changed to almost any number that is desired. To create your new PIN be sure to follow the instructions below

1. The new PIN is 7 to 15 digits long.
2. The new PIN can not contain all repeating numbers (3-3-3-3-3-3-3)
3. The new PIN can not have sequential numbers (1-2-3-4-5-6-7) or 7-6-5-4-3-2-1

Instructions

LED Activity












1. Press the Key button 	  will blink together
2. Enter the User PIN within 10 seconds and press the Key Button 	 will blink
3. Rapidly press the Key button twice and hold the Key button on the second press for 4 seconds  	  will be on
4. Enter a new Admin PIN number and press the Key button 	  will double blink
Note: If the LEDs in the above step are "single blinking" then the first Key Press did not register or was not fast enough. If you continue, you will be changing the User PIN	
5. Re-enter the new Admin PIN number and press the Key button 	 will double blink if the new PIN is accepted and the Key is unlocked   Will blink alternately if the new PIN was not accepted
Note: if   blink alternately you will need to start over from step 3.	



After setting up the Admin PIN you should create a User PIN. If you use the Admin PIN to access the Key the User PIN will be erased.

Apricorn Aegis Secure Key
















8. Unlocking the Aegis Secure Key in Admin mode

Instructions	LED Activity
1. Press the Key button 2 times  	  will double blink together
2. Within 10 seconds enter the Admin PIN	
3. Press the Key button 	  will double blink if correct (The user PIN is now erased)  will blink if incorrect
4. Connect the Aegis Secure Key to a USB port within 30 seconds	 will be on  will be on or blink for activity  will be on or blink for activity
5. To lock the Aegis Secure Key, Unplug it from the USB port.	

9. Adding a User PIN code in Admin mode

A user PIN (Personal Identification Number) can be changed to almost any number that is desired. To create your new PIN be sure to follow the instructions below

1. The new PIN is 7 to 15 digits long.
2. The new PIN can not contain all repeating numbers (3-3-3-3-3-3-3)
3. The new PIN can not have sequential numbers (1-2-3-4-5-6-7) or 7-6-5-4-3-2-1

Instructions	LED Activity
1. Enter the admin mode	  will double blink
3. Press and hold the Key button for 3 seconds 	  will be on
4. Enter a new PIN number	
5. Press the Key button to store the new PIN 	  will double blink together
6. Re-enter the new PIN number	
7. Press the Key button to confirm the new PIN 	  will blink if the new PIN is accepted and the Key is unlocked & ready to use   Will blink alternately if the new PIN was not accepted
Note: if   blink alternately you will need to start over from step 3.	

Apricorn Aegis Secure Key

Frequently Asked Questions

How to unlock the Aegis Secure Key if your battery is dead

Your Aegis Secure Key has a built-in rechargeable battery. If the battery is fully discharged you can still continue to use the product by following the instructions below:

- a) Connect the Aegis Secure Key to a USB port on any computer
- b) While the Key is connected to the computer, enter the User or Admin PIN to unlock the Key
- c) While connected to the USB port, the internal battery will automatically charge. We recommend you keep the Key connected for approximately 1 hour to fully charge the battery.

If you forget your PIN

If you forget the User and Admin PINs, there is absolutely no way of gaining access to the data stored on the Key, there are no back doors into the Key. You will need to completely reset the Aegis Secure Key by following the directions in section 4. By resetting, all data stored on the Key will be inaccessible.

When the Aegis Secure Key is reset the following occurs:

- * A new encryption key is generated
- * The User and Admin PIN are deleted
- * All the data on the Key is no longer accessible
- * A new User PIN will need to be set (section 5)
- * The Aegis Secure Key will need to be formatted (section 6)

Brute force or hacking attempt protection

If your Aegis Secure Key has 10 consecutive unsuccessful attempts to unlock, the brute force will activate and will completely reset the Key as follows:

- * A new encryption key is generated
- * The User and Admin PIN are deleted
- * All the data on the Key is no longer accessible
- * A new User PIN will need to be set (section 5)
- * The Aegis Secure Key will need to be formatted (section 6)

Technical Support

Apricorn provides the following helpful resources for you:

1. Apricorn's Website (<http://www.apricorn.com>)

This gives you the ability to check for up-to-date information

2. E-mail us at support@apricorn.com

3. Or call the Technical Support Department at **1-800-458-5448**

Apricorn's Technical Support Specialists are available from 8:00 a.m. to 5:00 p.m., Pacific Standard Time Monday through Friday

Warranty and RMA information

Three Year Limited Warranty:

Apricorn offers a 3-year limited warranty on the Aegis Secure Key against defects in materials and workmanship under normal use. The warranty period is effective from the date of purchase either directly from Apricorn or an authorized reseller.

Disclaimer and terms of the warranties:

THE WARRANTY BECOMES EFFECTIVE ON THE DATE OF PURCHASE AND MUST BE VERIFIED WITH YOUR SALES RECEIPT OR INVOICE DISPLAYING THE DATE OF PRODUCT PURCHASE.

APRICORN WILL, AT NO ADDITIONAL CHARGE, REPAIR OR REPLACE DEFECTIVE PARTS WITH NEW PARTS OR SERVICEABLE USED PARTS THAT ARE EQUIVALENT TO NEW IN PERFORMANCE. ALL EXCHANGED PARTS AND PRODUCTS REPLACED UNDER THIS WARRANTY WILL BECOME THE PROPERTY OF APRICORN.

THIS WARRANTY DOES NOT EXTEND TO ANY PRODUCT NOT PURCHASED DIRECTLY FROM APRICORN OR AN AUTHORIZED RESELLER OR TO ANY PRODUCT THAT HAS BEEN DAMAGED OR RENDERED DEFECTIVE: 1. AS A RESULT OF ACCIDENT, MISUSE, NEGLIGENCE, ABUSE OR FAILURE AND/OR INABILITY TO FOLLOW THE WRITTEN INSTRUCTIONS PROVIDED IN THIS INSTRUCTION GUIDE; 2. BY THE USE OF PARTS NOT MANUFACTURED OR SOLD BY APRICORN; 3. BY MODIFICATION OF THE PRODUCT; OR 4. AS A RESULT OF SERVICE, ALTERATION OR REPAIR BY ANYONE OTHER THAN APRICORN AND SHALL BE VOID. THIS WARRANTY DOES NOT COVER NORMAL WEAR AND TEAR.

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Poway, CA, U.S.A. 92064
1-858-513-2000 www.apricorn.com



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